# COUNTY JUVENILE SERVICES COMPREHENSIVE PLAN

## **Jefferson County**

January 1, 2009 to December 31, 2011

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NEBRASKA COMMISSION ON LAW ENFORCEMENT AND CRIMINAL JUSTICE

### I. Cover Page:

a. Jefferson County

b. The County Juvenile Services Comprehensive Plan for Jefferson County will cover the years of 2009-20011.

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#### II. Community Team Section:

- a. The name of Jefferson County's community team is the Jefferson Community Coalition. The Coalition meets at least nine times per year. Committee or additional meetings are called if fifty percent of the Coalition members see a need. Please see attached Code of By-Laws for additional information.
- b. Please refer to the attached Jefferson Community Coalition sign in sheet for a complete listing of members.

## III. Community Planning Tool:

The Jefferson Community Coalition continues to draw from and utilize material and information aggregated during consultation with the Juvenile Justice Institute on January 16, 2006. Minutes from three Jefferson Community Coalition meetings, spanning several months, in 2008 evidence the ongoing discussion. The following is the actual summary/recommendations provided to the Jefferson Community Coalition from the Juvenile Justice Institute referred to in this continued County Juvenile Services Comprehensive Plan:

The Jefferson Community Coalition met on January 16, 2006 to discuss the community planning tool and subsequent priorities for this community. Officials from law enforcement, County Attorney, Diversion, OJS, City and County Commissioners, extension, Blue Valley Community Action, schools and parent representatives were present for this meeting. As a result of the discussions had at this meeting, the following recommendations are for consideration for the next three year Juvenile Comprehensive Plan:

1) Due the coalition eliminating the diversion program, the comprehensive plan needs to reflect the priority of after school programming. In addition, important components need to be included to be effective such as education, mentoring, community service, and parental involvement.

- 2) Truancy remains such an accurate predictor of future delinquency. Along with truancy comes the issue of school connectivity. Between July and December 2002, the YLS/CMI (Youth Level of Services/Case Management Inventory) assessment tool was administered to approximately 1100 Nebraska youth. The results of this tool indicated that truancy was the 7th ranked risk factor of juvenile delinquency. The use of a standardized assessment instrument could benefit school administrators and juvenile justice professionals with the ability to evaluate a juvenile's situation before it got to the point of justice intervention. As the truancy and school connectivity are related, a community is tasked with the efforts to provide after school programs, mentoring, and other community service activities to youth.
- 3) Another issue in the juvenile justice system is peer accountability. A recommendation to combat this issue would be to start Teen Court. This could be easily implemented as an extension of the after school programming.
- 4) Alternatives to detention need to be addressed. Implementing electronic monitoring by probation, for example, can benefit the supervision needs of the county.
- 5) The Youth Risk Behavior Survey results for this year will be published in the near future. Juvenile Justices officials recognize that Jefferson County continues to have a substance abuse issue among the 10-17 year old ages. With the results of this survey and other research, Jefferson County may need to start looking at taking a more aggressive stance against the substance abuse issues in this community. The community needs to have a comprehensive look at substance abuse from prevention to aftercare treatment which is juvenile specific.

The complete data information/planning tool provided by the Juvenile Justice Institute is included as Appendix A.

### IV. Identified Priority Areas:

#### 1. After School Programming

After school programming continues to be identified as one of the priority areas in Jefferson County based on discussions of the Jefferson Community Coalition. Data presented at Jefferson Community Coalition meetings to support and supplement these discussions include the Nebraska Risk and Protective Factor Student Survey for 2007 in Jefferson County and the Crime Commission Report. The Jefferson County Profile Report is included in this report.

The Jefferson Community Coalition lead in a direction of prevention programming as a priority rather than Juvenile Diversion for the last two years believing that prevention may ultimately have a greater impact on youth, the community and the juvenile justice system than providing youth with diversion education. This is being re-evaluated in order to explore the possibility of providing both prevention and Juvenile Diversion in the future.

Urban areas there are generally many programs that support youth development, often financed through community service block grants, corporate investments and private foundations. However, the rural areas often have little to offer youth that involve them in positive activities after school. When programs are limited and structured activities are not available for youth, problems often develop in the community, as young people are more likely to get involved in high-risk behaviors. Though the Nebraska Crime Commission report (<a href="http://www.ncc.state.ne.us/documents/other/meth.htm">http://www.ncc.state.ne.us/documents/other/meth.htm</a>) indicates that there has been a decline in crimes overall, the graph in the report demonstrates that a number of our rural areas are experiencing an increase in theft, vandalism and other criminal activity. This criminal activity could be linked to a lack of supervision and positive, productive activities, which help to reduce opportunities for risky behavior after school hours.

#### 2. Substance Abuse Prevention

The Jefferson Community Coalition continues to identify substance abuse prevention as another priority area. As noted earlier, data found in the Nebraska Risk and Protective Factor Student Survey Results for 2007 – Jefferson County Profile Report was a supporting factor in the continuation of Substance Abuse Prevention.

In a Methamphetamine Treatment Study completed in December 2005, and included on the Nebraska Crime Commission's web site (<a href="http://www.ncc.state.ne.us/documents/other/meth.htm">http://www.ncc.state.ne.us/documents/other/meth.htm</a>), Nebraska is experiencing a growing problem with the use and abuse of the illegal drug, Methamphetamine.

#### 3. Community Network Supporting Youth Service

The Jefferson Community Coalition recognizes the need to engage the community in positive "community service" opportunities for youth and therefore has committed to take the initial steps to build a "community network supporting youth service" as another one of our priority areas. A "Network" of agencies where youth can go to complete community service has been created. Utilizing this "Network" of community agencies as a formal venue with guidance and oversight is a phase that will be developed and implemented over the next three years.

Research indicates a decline in our nation's interest in being civically engaged and involved in volunteering in the community. Building community supports and service-learning opportunities has the potential to assist youth in the development of skills and knowledge to understand the role they could play as they learn to take more responsibility in their communities. According to findings from a National Survey, Community Service and Service-Learning in U.S. Public Schools, 2004, "service-learning remains an important strategy for simultaneously engaging young people in civic and community life, promoting their healthy development, and strengthening their education".

A national study of Learn and Serve America programs suggests that effective service-learning programs improve academic grades, increase attendance in school, and develop personal and social responsibility. Whether the goal is academic improvement, personal development, or both,

service-learning can help youth learn critical thinking, communication, teamwork, civic responsibility, mathematical reasoning, problem solving, public speaking, vocational skills, computer skills, scientific method, research skills, and analysis.

A long-term objective of the Jefferson County Juvenile Services Comprehensive Plan is to support the growing network of local community based organizations, businesses, churches, and schools in the establishment of a strong viable after school program that will effectively demonstrate the commitment of community supporting youth and youth supporting the community. Service-learning, through service clubs at the Fairbury Youth Involvement Center, will continue to be a tool used in support of this effort.

The Jefferson Community Coalition believes that this concept will continue to address two needs in the community. First, youth assigned community service by a probation officer will have a venue for which to serve with a structured plan and comprehensive oversight of their service. Secondly, it is the goal that this "community network supporting youth service" will act as a preventive to youth crime. As previously noted, youth don't feel any opportunity within their community for positive interaction nor do they see any reward for positive behavior. Service-learning combines service to the community with learning in a way that improves both the youth and the community. As youth participate in community service projects, actively meeting the needs of communities, youth develop practical skills, self-esteem, and a sense of civic responsibility. Service-learning, implemented by the Fairbury Youth Involvement Center, overseen by Blue Valley Community Action's Juvenile Services department, may very well be the venue by which the youth of Jefferson County begin to feel connected to their community.

### V. Strategies:

#### 1. After School Programming

The FYI After School Program works collaboratively with the Corporation for National and Community Service. AmeriCorps, a program of the Corporation for National and Community Service, helps community based organizations implement projects or ideas that require special assistance. The Corporation for National and Community Service assists in providing human capital, people power, to help address emerging needs in communities.

AmeriCorps members will continue to be used to provide direct service to youth in all programming areas at the FYI After School Program. AmeriCorps members have also be used to mobilize community volunteers and strengthen the capacity of the FYI Center.

The FYI Program Manager will provide oversight and supervision of the FYI After School Program. These duties will include acting as an advisor to the AmeriCorps members, collecting, aggregating and analyzing data for quarterly reports, participating as an active member of the Jefferson Community Coalition and also in county interagency meetings to ensure the quality of the FYI After School Program.

The FYI After School Program will continue to take place at the FYI Center located in Fairbury, NE targeting kindergarten through twelfth grade. Operating hours of the FYI Center are Monday through Friday until 6 p.m. When school is out of session, the FYI Center is opened from 12 p.m. until 6 p.m.

The five components of the FYI After School Program include the following:

The first component is Prevention Education. Prevention education is achieved through the FYI Center working collaboratively with community members, area schools, law enforcement agencies, and Rural Region V Systems in the development and implementation of youth activities that support prevention of illegal and violent behavior and to promote prosocial behavior. Prevention specialists will provide enriching learning opportunities through presentations in the area of alcohol, tobacco, and other drugs, healthy teen relationships, bullying, and positive decision-making.

The second component is Homework Assistance. With the support of the FYI Program Manager, AmeriCorps members will be devoted to developing and implementing Homework Assistance services. Youth will access services in one of three ways, 1) drop-in, 2) referred by school, 3) referred by parent and/or guardian. AmeriCorps members will assist youth in completing homework assignments, by offering a structured environment in which to complete the work, assisting them in research, or offering guidance in completing the assignment. The principals in both the high school and intermediate schools are supportive of this service and believe they have numerous youth who will not only benefit from this service, but will also access the service. The principals have verbally committed to the FYI Center having access to teachers and assignment information. This information will be utilized as an outcome measure in the quarterly reports.

Computer Technology is the third component of the FYI After School Program. AmeriCorps members will develop programming, with assistance from the program manager and the BVCA computer technology department, to provide youth with basic computer skills and supervise "free time" for youth to access computers. Many youth in the county do not have computers at home, nor do they have access to the Internet at home. This limits their ability to practice computer skills taught in the classrooms and to complete assignments via computers. Computer services will take place in the computer room at the center and will be highly supervised. The members will be well versed in computer terminology and will know "codes" youth use to speak to peers in order to ensure that all activity is appropriate and beneficial.

The fourth component that the AmeriCorps members will focus on is Health & Recreation, which is very broadly defined. The members will be responsible, with input and guidance from the program manager, for developing a wide range of recreation services. This will include arts and crafts, physical activity, and health information. Health information is important to provide, especially given the current state of childhood obesity in our society. The goal of the recreation services is to give youth the opportunity to find and develop an area of interest, which might include basketball, cross-stitch, or painting. The hope is that youth will walk away from this service having cultivated a hobby and a skill, which will last throughout their lifetime. Youth who are active have less time to get involved in delinquent behavior. To ensure that services are

well rounded, youth need access to academic and mentoring services as well as health and recreation.

Mentoring is the fifth component of the FYI After School Program. According to America's Promise, youth without mentors are 50% more likely to use drugs and twice as likely to skip school. AmeriCorps members will receive training from a certified mentor trainer. As mentors, the AmeriCorps members will meet with identified youth to determine, with the help of the program manager, what activities would be most beneficial for that youth. Mentoring services will be delivered on a very individualized, structured basis and will draw upon a strength-based approach. AmeriCorps members as mentors, having been trained in the use of the Search Institute's 40 developmental assets, will assess youth for the existence of assets. Once assets have been identified, AmeriCorps members will work with youth to enhance these assets and to develop other such assets.

The FYI After School Program, under the direction of the Jefferson Community Coalition and Blue Valley Community Action Partnership, is committed to providing prevention programming in a safe and supervised after school setting.

#### 2. Substance Abuse Prevention

As part of the strategy to address substance abuse in Jefferson County, the Jefferson Community Coalition established the following goals and objectives.

The goals of the Jefferson Community Coalition are as follows:

- To reduce substance abuse among youth and overtime, among adults.
- To establish and strengthen collaboration among communities; private and non-profit agencies; federal, state, and local government.
- To build and support a positive environment for the growth and development of all citizens of Jefferson County.

The objectives of the Jefferson Community Coalition are as follows:

- By 2011, we will increase awareness of the risks of substance abuse through media campaigns.
- By 2011, we will decrease alcohol use by youth by 10%.
- By 2011, we will decrease alcohol use by youth by 10%.

The Jefferson Community Coalition will seek out, apply for, and fully utilize funds available to plan and carry out media campaigns via billboards, radio ads, print ads, and slide previews at the local theatre exposing the dangers of substance abuse and its effects on young people.

The Jefferson Community Coalition will continue to actively pursue the support of local businesses, organizations, churches, etc. and to also seek additional grant funds to support future substance abuse prevention activities throughout the this three-year comprehensive plan.

#### 3. Community Network Supporting Youth Service

The compelling need to incorporate community network supports and service-learning methodology in Jefferson County is based on the opinion that community service needs to be meaningful and connected to defined learning goals for the youth performing the community service and also meet an identified community need.

Continuing with a second three-year comprehensive plan, the Jefferson Community Coalition will build upon the community network supporting a service-learning infrastructure and fully support effective implementation. The Jefferson Community Coalition will also continue to explore the possibility of stimulating educators in Jefferson County to embrace service-learning as a powerful strategy for enhancing student achievement and engagement.

#### b. Strategy details:

#### 1. After School Programming

The BVCA Juvenile Services via the FYI Center continues to provide after school programming and will continue to do so throughout the three-year comprehensive plan. The need for continued development and/or program expansion continues to be reviewed on an annual basis.

On-going after school programming objectives in Jefferson County expect result in the following outcome areas:

- Youth of Jefferson County will continue to have a safe, supervised place to go after school hours.
- Youth attending the after school program will continue to be provided with assistance in completing their homework assignments.
- Youth attending the after school program will continue to be provided with various prevention education presentations (i.e. alcohol, tobacco, and other drugs, healthy teen relationships, bullying, positive decision-making).

#### 2. Substance Abuse Prevention

The Jefferson Community Coalition is currently in its second program year of providing substance abuse prevention media campaigns. The following entities have committed as partners in the project:

Fairbury Optimist Club
Fairbury Elks Club
Region V Systems – assisting with regional collaborations
Fairbury Police Department
Jefferson County Sheriff's Department
Jefferson County School Officials

Fairbury Youth Involvement (FYI) Center Energizers – drug free group KUTT/KGMT Radio Station Fairbury Journal News Fairbury City Council County Commissioners

Long term and over reaching outcomes that the Jefferson Community Coalition hopes to continue to attain through media campaigns are:

- Residents of Jefferson County, and the surrounding counties, will be made aware of the Jefferson Community Coalition and our vision; "To assure a high quality of life for all citizens of Jefferson County through community development and involvement."
- Residents of Jefferson County will be made aware of the dangers and effects of substance abuse.
- Over time, this effort will contribute to the reduction of substance abuse among youth and adults.
- This media campaign will contribute significantly to the successful completion of one
  of the overreaching goals of the Jefferson Community Coalition of establishing and
  strengthening collaborations among community members, business owners, school
  officials, community organizations, churches, etc. in an effort to build toward a
  comprehensive community prevention approach.

Additionally, the campaigns strive to bring awareness to the adults of the community as to how their actions may be directly contributing to the substance abuse issue in Jefferson County.

#### 3. Community Network Supporting Youth Service

The Jefferson Community Coalition has established the following goals and objectives to assist in the maintenance and implementation of the "community network supporting youth service":

The goals of the Jefferson Community Coalition in this area continue to be:

- To support youth with opportunities for positive behavior.
- To support local law enforcement in the pursuit of youth accountability in the juvenile justice system through community service.
- To build and support a community network that supports youth service as a venue to establish and strengthen connections between youth and community.

The objectives of the Jefferson Community Coalition are as follows:

- By 2011, through community service we will decrease truancy by youth by 10%.
- By 2011, we will continue to build, support and implement programming utilizing the community network supporting youth service.
- By 2011, 70% youth required to do community service through the juvenile justice system in Jefferson County will complete service through the community network supporting youth service.

The Jefferson Coalition believes that building a community network in support of service learning will result in the following outcomes:

- Youth assigned community service by a probation officer will have a venue for which to serve with a structured plan and comprehensive oversight of their service.
- A "community network supporting youth service" will act as a preventive to youth crime.

The Jefferson Community Coalition believes that as youth participate in community service projects, actively meeting the needs of communities, youth develop practical skills, self-esteem, and a sense of civic responsibility.

### VI. Jefferson County Community Socio-economics Population 2000: 8,333 Square miles: 573.01

	2000 CENSUS DATA		
	JEFFERSON COUNTY	NE	US
POPULATION			
Number	N	umber N	lumber
Total population			
8,333			
Square miles (land) 573.01			
Population per square mile			
14.54		22.26	79.56
GENDER		22.20	79.50
Number	Pct	Pct	Pct
Male			
4,073	48.9	49.3	49.1
Female			
4,260	51.1	50.7	50.9
AGE			
Number	Pct	Pct	Pct
15 or younger	10.0	24.6	24.4
1,554	18.6	21.6	21.4
16-24 896	10.8	14.9	13.9
25-44	10.8	14.9	13.9
1,971	23.7	28.5	30.2
45-64	23.7	20.5	50.2
2,023	24.3	21.5	22.0
65+			
1,889	22.7	13.6	12.4
Average age (years)			
42.64		36.45	36.22

RACE AND ETHNICITY		
<b>Number</b> White	Pct	Pct Pct
8,201	98.4 8	39.6 75.1
Black or African American		
6 American Indian and Alaska native	0.1	4.0 12.3
32	0.4	0.9 0.9
Asian		
14 Native Hawaiian and other Pacific islande	0.2	1.3 3.6
3	0.0	0.0 0.1
Some other race	0.5	20
42 Two or more races	0.5	2.8 5.5
35	0.4	1.4 2.4
Hispanic or Latino		
EDUCATIONAL ATTAINMENT 109	1.3	5.5 12.5
Number		ber Number
Population 25 and older		
5,878		
Number		Pct Pct
<b>Number</b> High school graduates (includes equivale	ncy)	
<b>Number</b> High school graduates (includes equivale 2,386	ncy)	Pct Pct 31.3 28.6
Number High school graduates (includes equivale 2,386 Some college, or associate's degree	ncy) 40.6 3	31.3 28.6
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Number  High school graduates (includes equivale 2,386  Some college, or associate's degree 1,719  Bachelor's degree 606  Master's, professional or doctorate degree 238  SCHOOL ENROLLMENT  Number  Population 3 years and over enrolled in s 1,844  Number	(ncy) 40.6 3 29.2 3 10.3 1 4.0 Num chool	31.3 28.6 31.6 27.4 36.5 15.5 7.3 8.9 36 Ser Number Pct Pct
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## MEDIAN HOUSEHOLD INCOME BY AGE (\$ IN PREVIOUS YEAR)

	Number	Number	Number
Median household income	32,629	39,250	41,994
Householder under 25	22,308	22,771	22,679
Householder 25-34	33,571	39,271	41,414
Householder 35-44	38,828	47,436	50,654
Householder 45-54	48,142	53,195	56,300
Householder 55-64	35,398	44,595	47,447
Householder 65-74	25,486	30,765	31,368
Householder 75 and older	21,173	21,400	22,259
DED CARTE THOOMERY DAGE OR STUDIOSTIC			
PER CAPITA INCOME BY RACE OR ETHNICITY (\$)  Per capita income	<b>Number</b> 18,380	<b>Number</b> 19,613	<b>Number</b> 21,587
White	18,531	20,505	23,918
Black or African American	0	13,055	14,437
Native American	5,303	9,374	12,893
Asian	5,000	16,739	21,823
Native Hawaiian and Pacific islander	0	13,670	15,054
Some other race	14,041	10,141	10,813
Two or more races	9,905	9,582	13,405
Hispanic or Latino	13,901	10,752	12,111

Jefferson County is a county located in the U.S. state of Nebraska. It was named in honor of Thomas Jefferson, third President of the United States of America. Its county seat is Fairbury.<sup>[1]</sup> The population was 8,333 at the 2000 census.

In the Nebraska license plate system, Jefferson County is represented by the prefix 33 (it had the thirty-third-largest number of vehicles registered in the county when the license plate system was established in 1922).

According to the U.S. Census Bureau, the county has a total area of 576 square miles (1,491 km²), of which, 573 square miles (1,484 km²) of it is land and 2 square miles (6 km²) of it (0.43%) is water.

As of the census<sup>[2]</sup> of 2000, there were 8,333 people, 3,527 households, and 2,352 families residing in the county. The population density was 14 people per square mile (6/km²). There were 3,942 housing units at an average density of 7 per square mile (3/km²). The racial makeup of the county was 98.42% White, 0.07% Black or African American, 0.38% Native American, 0.17% Asian, 0.04% Pacific Islander, 0.50% from other races, and 0.42% from two or more races. 1.31% of the population were Hispanic or Latino of any race.

There were 3,527 households out of which 28.00% had children under the age of 18 living with them, 57.90% were married couples living together, 5.80% had a female householder with no husband present, and 33.30% were non-families. 29.60% of all households were made up of individuals and 17.20% had someone living alone who was 65 years of age or older. The average household size was 2.32 and the average family size was 2.85.

In the county the population was spread out with 23.30% under the age of 18, 6.10% from 18 to 24, 23.70% from 25 to 44, 24.30% from 45 to 64, and 22.70% who were 65 years of age or older. The median age was 43 years. For every 100 females there were 95.60 males. For every 100 females age 18 and over, there were 91.80 males.

The median income for a household in the county was \$32,629, and the median income for a family was \$40,747. Males had a median income of \$26,929 versus \$18,594 for females. The per capita income for the county was \$18,380. About 8.00% of families and 8.90% of the population were below the poverty line, including 10.20% of those under age 18 and 8.70% of those age 65 or over.

City and villages The surrounding communities that encombus Jefferson County are: Daykin, Diller, Endicott, Fairbury, Harbine, Jansen, Plymouth, Reynolds, and Steele City.

TRANSPORTATION: Served by one major railroad, State Highways 8 and 15, U.S. Highway 136, a municipal airport with paved runway and two truck lines.

	Jefferson Community Coalition	mmunity	Coalition Date: October 20, 2008	2008	
Name	Address	Phone	Email	Community Sector Initials	itials
Linda Bauer	411 4th St., Fairbury	729-2584	jeffcoatty@diodecom.net	County Attorney	
Brooks Bryan	606 3rd St., Fairbury	729-7925	fpd6@diodecom.net	Fairbury Police Depart.	
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Armin Daubendiek	2019 E St.	729-2766	ad74908@alltel.net	Community Member	
Michael Dux	56290 710 Road, Fairbury	729-5706	michaeltdux@yahoo.com	County Commissioner	
Derek Effle	1645 N St, Suite A, Lincoln	441-4346	deffle@region5systems.net	Region V Systems	
Keith A. Fisher	606 3rd St., Fairbury	729-2284	dpfish33@yahoo.com	County Sheriff's Office	
Carmen Hinman	PO Box 365, Fairbury	729-2570	chinman@hopecrisiscenter.org	Hope Crisis Center	
Collena Laschanzky P.O. Box 352	P.O. Box 352	729-6510	claschanzky@bvca.net	Blue Valley Community Action	
Barb Schmidt	517 F St., Fairbury	729-3487	bschmidt1@unl.edu	UNL Extension Educator	
Darci Shibley	1100 B Street	729-3020	dshibley@bvca.net	FYI Center	
Susan Thomas	71870 563 Ave., Faribury	729-6243	susan.shadyacres@gmail.com	School Counselor	
Deb Valentine	65205 713th Road, Fairbury	729-3563	dvalentine@diodecom.net	Clergy	
Sharon Vandegrift	909 H Street, Fairbury	729-3351	sharon.vandegrift@jchc.us	Jeff Comm Health Center	
Jed Vaughn	721 4th St., Fairbury	239-4318	kjvaughn@yahoo.com	Community Member	
Brett Wentz	606 3rd St., Fairbury	729-7924	fpd2@diodecom.net	Fairbury Police Dept.	
Angela Harroun	PO Box 365, Fairbury	729-6510	aharroun@bvca.net	Parent	
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## Appendix A

Community Planning Decision Point Analysis

<b>√</b>		
Data Points	Total Population (*2000)	Juvenile Population (**2004)
Total Population	8333	914
Male	4073	504
Female	4260	500
White	8201	898
Black/African American	6	6
Asian	14	3
Hawaiian/Pacific Islander	3	Not reported
American Indian	32	7
Hispanic	109	13
Juveniles Arrested		23
Juveniles Detained		2
Juveniles Prosecuted	**************************************	51
Juveniles Placed in Diversion		23
Number of Juveniles Adjudicated		42
Number of Juveniles placed on Probation		13
YRTC-Kearney commitments	**************************************	3
YRTC-Geneva commitments		1
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#### Sources:

## System Decision Point: Arrest/Citation: Police/Law Enforcement

Decision: Whether an information report should be filed, or what offense, if any, with which juvenile should be cited or arrested

#### **Formal Determining Factors**

- Sufficient factual basis to believe offense committed
- Underlying support for a particular offense

#### **Informal Determining Factors**

- Officer's inclination/patience
- Youth's prior incidences with law enforcement
- Contacts are recorded by law enforcement-school resource officer is also playing a role in contacts

Decision: Whether to cite or arrest juvenile for juvenile or adult

### **Formal Determining Factors**

- Seriousness of offense
- Age

### **Informal Determining Factors**

- Law enforcement is not separating juvenile and adult related offenses at the time of arrest

<sup>\*2000</sup> U.S. Census Data

<sup>\*\*2003</sup> OJJDP website and 2004 DMC Federal Reports (Ages 10-17)

Decision: Whether to take juvenile into custody or to cite and release (NRS § 43-248(1), (2); § 43-250(1), (2), (3))

#### **Formal Determining Factors**

- As stated in statute

#### **Informal Determining Factors**

- Immediate risk to juvenile
- Immediate/short term risk to public
- Seriousness of perceived offense
- Extent to which parent or other responsible adult available to take responsibility for juvenile
- Cite and release is most common practice due to geographical challenges of placement

#### Comments:

According to statistics from the Crime Commission, 23 juveniles were arrested in 2004. According to Jefferson county officials, specific type of offenses are on the rise including young offenders (8-12 years old), sex offenders, and truancy cases. At this time, the law enforcement agencies in the county do not have the same reporting of information or data base system for information.

## System Decision Point: Initial Detention: State of Nebraska Probation

Decision: Whether juvenile should be detained or released

#### **Formal Determining Factors**

- Risk assessment outcome
- Accessibility of placement options: parent's/guardians, emergency shelter, staff secure facility, secure detention facility

#### **Informal Determining Factors**

- Law enforcement is not contacting probation unless it is absolutely necessary
- Probation has very limited placement options which when the placement is necessary has caused significant time to locate an appropriate place
- Jail is not cite and sound so cannot use as a temporary placement

#### Comments:

According to statistics from probation, only 2 juveniles were placed in secure detention in 2004. Due to limited options for initial and post detention placement, law enforcement is very selective on cases needing detention. Law enforcement stated they have called all over the State in attempts to find a placement for a juvenile, but due to no contracts with placement facilities they are often denied.

## System Decision Point: Charge Juvenile: County Attorney

Decision: Whether to prosecute juvenile

### **Formal Determining Factors**

- Likelihood of successful
- Factors under NRS § 43-276

### **Informal Determining Factors**

- Ist time offenders, non-violent referred to diversion-however diversion will no longer be an option
- Truancy cases are on the rise with limited options for consequences
- Young offenders (ages 8-12) are increasing with lack of appropriate system responses

Decision: Whether youth should be prosecuted as juvenile or adult

#### **Formal Determining Factors**

- Seriousness of offense

### **Informal Determining Factors**

- If the charge(s) is a misdemeanor and under the age of 18 will file juvenile.
- If the charge(s) is felony and 16 years or older will file adult

Decision: Offense for which juvenile should be charged

**Formal Determining Factors** 

#### **Informal Determining Factors**

- Charges are based off information in reports by law enforcement

**Problem:** Diversion program is no longer going to be an option for Jefferson

County

Solution: Coalition is applying for a after school grant to convert the diversion

program into this program for specific needs of the community.

#### Comments:

According to statistics from the Crime Commission, the County Attorney prosecuted 51 cases in 2004. Diversion has been an option for the County Attorney, but as of June 30, 2006 this will no longer be a consideration for prosecution due to elimination of this program. Jefferson County is planning on converting the diversion program to a more expansive after school program which will have a lesser criteria for admission.

## System Decision Point: Pre-adjudication detention: Juvenile Court Judge

Decision: Whether juvenile detained at the time of citation/arrest should continue in detention or out-of-home placement pending adjudication

#### **Formal Determining Factors**

- Whether there is an "immediate and urgent necessity for the protection of such juvenile"
- Whether there is an "immediate and urgent necessity for the protection of . . .the person or property of
- Whether the juvenile is likely to flee the jurisdiction of the court

#### **Informal Determining Factors**

- Judge is releasing at detention if not a risk to the community
- Commissioners have no concern about detention costs because of the limited cases where this is used

#### Comments:

With a low number of detentions, the issues surrounding pre-adjudication detention does not seem to be a main priority. However, if there were more options for the court, there may be an increase in requests by law enforcement. Electronic monitoring is an cost effective alternative to detention which can be monitored by any agency. This would allow the juvenile who needs additional supervision pre-adjudication to have monitoring with the ability for them to be in community.

## System Decision Point: Probable Cause Hearing: Juvenile Court Judge

Decision: Whether State can show that probable cause exists that juvenile is within the jurisdiction of the court

#### **Formal Determining Factors**

- As stated in statute

## **Informal Determining Factors**

- Judge is making ruling from the bench

#### Comments:

No comments for this section

## System Decision Point: Competency Evaluation: Juvenile Court Judge

Decision: Whether juvenile is competent to participate in the Proceedings

#### **Formal Determining Factors**

- As outlined in statute

#### **Informal Determining Factors**

- Judge will use evaluation if it is 43-247 3 (c) ease

Decision: Whether juvenile is "responsible" for his/her acts

#### **Formal Determining Factors**

## **Informal Determining Factors**

- "Complete evaluation of the juvenile including any authorized area of inquiry requested by the court."
- Opinion of physician, surgeon, psychiatrist, community mental health program, psychologist

- No factors reported

#### Comments:

No comments for this section.

System Decision Point: Adjudication: Juvenile Court Judge

Decision: Whether the juvenile is, beyond a reasonable doubt, "a

person described by § 43-247"

#### **Formal Determining Factors**

- Legal sufficiency of evidence presented during adjudication hearing
- Whether juvenile admits the allegations of the petition (or, "pleads to the charges")
- Residency
- Age

#### **Informal Determining Factors**

- No factors reported

Decision: Whether to order probation to conduct a pre-disposition investigation (statutory authority unclear--see also: § 29-

2261(2)

#### **Formal Determining Factors**

-As outlined in statute

#### **Informal Determining Factors**

- PDI's are ordered based on circumstances of the cases and recommendations by prosecution
- By practice, city ordinances and infractions (excluding Possession of Marijuana)

Decision: Whether to order OJS evaluation

#### **Formal Determining Factors**

- NRS § 29-2204 (3): "Prior to making a disposition which commits the juvenile to the Office of Juvenile Services, the court shall order the juvenile to be evaluated

#### **Informal Determining Factors**

- Judge is using as a diagnostic tool
- The number of OJS evaluations have increased especially on 12-15 year

by the office if the juvenile has not had an evaluation within the past twelve months.

Decision: Whether to order a PDI and an OJS Evaluation

#### Formal Determining Factors

#### **Informal Determining Factors**

-As outlined in statute

- Depends on circumstances of the

#### Comments:

According to the Crime Commission statistics, Jefferson County had 42 juvenile adjudications in 2004. Due to resources available to the court, the judge is utilizing HHS/OJS for their access to resources rather than probation.

### System Decision Point: Disposition: Juvenile Court Judge

Decision: Whether to place juvenile on probation

#### **Formal Determining Factors**

- As outlined in statute

#### **Informal Determining Factors**

- The need for services for the juvenile or family drives the decision for disposition
- Even if the Judge orders an OJS evaluation, he is still willing to place on probation as disposition

Decision: Whether to commit juvenile to the Office of Juvenile

#### **Formal Determining Factors**

**Informal Determining Factors** 

- Whether juvenile is at least twelve years of age

- Will use for in or out of home

Decision: Whether to place juvenile on probation and commit juvenile to HHS or OJS

### **Formal Determining Factors**

- As outlined in statute
- No apparent authority for delinquent in the legal custody of parents/guardian

#### **Informal Determining Factors**

- Judge does not do dual supervision cases

#### Comments:

According to statistics from probation, 13 juveniles were placed on probation with the remaining juvenile adjudications having other dispositions involving HHS or OJS. The Judge rarely commits a juvenile to YRTC Kearney or Geneva with 3 and 1 respectively.

## System Decision Point: Administrative Sanctions: Probation

Decision: Whether to impose administrative sanctions on a probationer

### **Formal Determining Factors**

- Probation officers has reasonable cause to believe that probationer has committed or is about to commit a substance abuse violation or a non criminal violation
- Substance abuse violation refers to a positive test for drug or alcohol use, failure to report for such a test or failure to comply with substance abuse evaluations or treatment

### **Informal Determining Factors**

- Probation is using administrative sanctions for juveniles

#### Comments:

No comments for this section.

## System Decision Point: Motion To Revoke Probation: County Attorney

Decision: Whether to file a motion to revoke probation

### **Formal Determining Factors**

- As outlined in statute

## **Informal Determining Factors**

- County Attorney is filing a new case along with the motion to revoke petition
- Most cases involve plea agreements for admission on the violation of probation and subsequent dismissal of the new charge

#### Comments:

No comments for this section.

## System Decision Point: Modification/Revocation of Probation: Juvenile Court Judge

Decision: Whether to modify or revoke probation

#### **Formal Determining Factors**

- As outlined in statute

#### **Informal Determining Factors**

- Judge will usually continue services from probation to OJS
- Intensive Supervision Probation is rarely used for juvenile cases in

## Jefferson County

#### Comments:

No comments for this section.

## System Decision Point: Setting Aside Adjudication: Juvenile Court Judge

Decision: Whether juvenile has satisfactorily completed his or her probation and supervision or the treatment program of his or her commitment

#### **Formal Determining Factors**

- Juvenile's post-adjudication behavior and response to treatment and rehabilitation programs
- Whether setting aside adjudication will depreciate seriousness of juvenile's conduct or promote disrespect for the law
- Whether failure to set aside adjudication may result in disabilities disproportionate to the conduct upon which the adjudication was based

#### **Informal Determining Factors**

- Judge sets a determinate term of probation
- Judge does not do unsuccessful terms of probation for disposition of cases

Decision: Whether juvenile should be discharged from custody and supervision of OJS

#### **Formal Determining Factors**

- Presumably same as those for probation

#### **Informal Determining Factors**

- There is good communication between the OJS worker and other justice professionals about status of juveniles in their care and custody
- Judge does not do unsuccessful cases on OJS juveniles

#### Comments:

No comments for this section

### **Summary/Recommendations:**

Jefferson Community Coalition met on January 16, 2006 to discuss the community planning tool and subsequent priorities for this community. Officials from law enforcement, County Attorney, Diversion, OJS, City and County Commissioners, extension, Blue Valley Community Action, schools and parent representatives were present for this meeting. As a result of the discussions had at this meeting, the following recommendations are for consideration for the next three year Juvenile Comprehensive Plan:

- 1) Due the coalition eliminating the diversion program, the comprehensive plan needs to reflect the priority of after school programming. In addition, important components need to be included to be effective such as education, mentoring, community service, and parental involvement.
- 2) Truancy remains such an accurate predictor of future delinquency. Along with truancy comes the issue of school connectivity. Between July and December 2002, the YLS/CMI (Youth Level of Services/Case Management Inventory) assessment tool was administered to approximately 1100 Nebraska youth. The results of this tool indicated that truancy was the 7th ranked risk factor of juvenile delinquency. The use of a standardized assessment instrument could benefit school administrators and juvenile justice professionals with the ability to evaluate a juvenile's situation before it got to the point of justice intervention. As the truancy and school connectivity are related, a community is tasked with the efforts to provide after school programs, mentoring, and other community service activities to youth.
- 3) Another issue in the juvenile justice system is peer accountability. A recommendation to combat this issue would be to start Teen Court. This could be easily implemented as an extension of the after school programming.
- 4) Alternatives to detention need to be addressed. Implementing electronic monitoring by probation, for example, can benefit the supervision needs of the county.
- 5) The Youth Behavior Risk Survey results for this year will be published in the near future. Juvenile Justices officials recognize that Jefferson County continues to have a substance abuse issue among the 10-17 year old ages. With the results of this survey and other research, Jefferson County may need to start looking at taking a more aggressive stance against the substance abuse issues in this community. The community needs to have a comprehensive look at substance abuse from prevention to aftercare treatment which is juvenile specific.

## Nebraska Risk and Protective Factor Student Survey Results for 2007

## Jefferson County Profile Report



Administered by the Nebraska Department of Health and Human Services and the Nebraska Department of Education for Nebraska Partners in Prevention

## Introduction

## 2007 NRPFSS Jefferson County Report

This report summarizes the findings from the 2007 Nebraska Risk and Protective Factor Student Survey, the third implementation of a biennial survey of students in grades 6, 8, 10, and 12. The survey was designed to assess adolescent substance use, antisocial behavior, and many of the risk and protective factors that predict adolescent problem behaviors. The Nebraska survey is adapted from a national, scientifically validated survey and contains information on the risk and protective factors that are 1) locally actionable, 2) can not be obtained through any other source, and 3) are more highly correlated with substance abuse. While planning prevention services, communities are urged to collect and use multiple data sources, including archival and social indicators, assessment of existing resources, key informant interviews, as well as data from this survey.

Table 1 contains the characteristics of the students who completed the survey from your community or region (e.g.

#### CONTENTS:

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Practical Implications of
the Assessment

Data Charts:

- Substance Use
- Antisocial Behavior and Gambling
- Risk & Protective Factor Profiles
- Sources and Places of Alcohol and Cigarette Use

The Risk and Protective Factor Model of Prevention

Building a Strategic Prevention Framework

Tools for Assessment and Planning

Risk and Protective Factor Scale Definitions

**Data Tables** 

**Contacts for Prevention** 

school, district, county, or multi-county area) as well as the overall state. When using the information in this report, please pay attention to the number and percentage of students who participated from your community. If 60% or more of the students participated, the report is a good indicator of the levels of substance use, risk, protection, and antisocial behavior. If fewer than 60% participated, a review of who participated should be completed prior to generalizing the results to the entire community.

Comparisons between the number of students completing the survey from Table I and the student enrollment in your community and the state are shown in Table 2. The total percentage of students completing the survey and the percentage from each grade are shown in the "Percent" columns.

	Tabl	е 2. Ѕиг	vey Cor	npletion	Rate			
	County 2007 State 2007							
Grade	Number Surveyed	Number Enrolled	Percent	Number Surveyed	Number Enrolled	Percent		
6	80	83	96.4	6511	23485	27.7		
8	76	125	60.8	8186	23842	34.3		
10	125	156	80.1	8731	25093	34.8		
12	107	140	76.4	7616	24564	31.0		
Total	388	504	77.0	31044	96984	32.0		

Overall, 32% of the students in grades 6, 8, 10, and 12 in Nebraska completed the NRPFSS. While this completion rate is much lower than the 60% recommended above, the results from the 31,044 students who completed the survey provide useable estimates of substance use, antisocial behavior, risk, and protection of youth in Nebraska.

The survey was sponsored by Nebraska Partners in Prevention (NePiP), and was administered by the Nebraska Department of Health and Human Services, Division of Public Health and the Nebraska Department of Education, with assistance from Bach Harrison, L.L.C.

	eserce established.			450000000000000000000000000000000000000				6 Y6 Y 16 G 14 C
<b>*</b>	Count	y 2003	Count	y 2005	Count	y 2007	State 2007	
Total Students	Number	Percent	Number	Percent	Number	Percent	Number	Percent
-	467	100	399	100	388	100	31044	10
Grade								
6	121	25.9	106	26.6	80	20.6	6511	21,0
8	119	25.5	136	34.1	76	19.6	8186	26.4
10	129	27.6	87	21.8	125	32.2	8731	28.
12	98	21.0	70	17.5	107	27.6	7616	24.5
Gender					800000000000000000000000000000000000000		<u> </u>	
Male	239	64.6	190	48.7	176	46.1	15350	50.1
Female	131	35.4	200	51.3	206	53.9	15281	49.9
Ethnicity	14 (15 (15 p)	20013	50 81 63		F85012-16-16	Sanata asaa a	10201	49.2
Native American	7	1.5	18	4.3	6	1.4	1211	3,4
African American	1	0.2	0	0.0	7	1.7	652	
Hispanic	14	3.0	16	3.8	20	4.8	3667	1.8
White	439	93.4	364	87.1	365	87.7		10.4
Asian	2	0.4	3	0.7	4	1.0	26394	74.6
Pacific Islander	1	0.2	2	0.5	1	0.2	469	1.3
Other	6	1.3	15	3.6	13	3.1	138 2855	0.4 8.1

## How to Read the Charis in this Report

There are five types of charts presented in this report: 1) substance use, 2) antisocial behavior and gambling, 3) risk factors, 4) protective factors, and 5) sources and places of alcohol and cigarette use. If your school or community participated in the 2003 and 2005 NRPFSS, then comparison data for those administrations will also be included in the charts. The actual percentages from the charts are presented in tables at the end of this report.

## Substance Use Charts

This report contains information about alcohol, tobacco, and other drug use (referred to as ATOD use throughout this report) and other problem behaviors of students. The bars on each chart represent the percentage of students in that grade who reported the behavior. The three sections in the charts represent different types of problem behaviors. The definitions of each of the types of behavior are provided below.

- Ever-used is a measure of the percentage of students who tried the particular substance at least once in their lifetime and is used to show the percentage of students who have had experience with a particular substance.
- 30-day use is a measure of the percentage of students who used the substance at least once in the 30 days prior to taking the survey and is a more sensitive indicator of the level of current use of the substance.
- Heavy use includes binge drinking (having five or more drinks in a row during the two weeks prior to the survey) and use of one-half a pack or more of cigarettes per day.

## Antisocial Behavior and Gambling Charts

• Antisocial behavior (ASB) is a measure of the percentage of students who report any involvement during the past year with ten antisocial behaviors: Suspended from School, Drunk or High at School, Sold Illegal Drugs, Stolen a Vehicle, Been Arrested, Attacked Someone to Harm Them, Carried a Handgun, Taken a Handgun to School, Drinking and Driving, and Passenger with a Drinking Driver.

• Gambling behavior charts show the percentage of students who engaged in each of the 10 types of gambling: gambled at a casino; played the lottery; bet on team sports, played cards for money; bet money on horse races; played bingo for money or prizes; gambled on the internet; bet on dice games; bet on games of personal skill; gambled at school, church, or community event; as well as the percentage for any gambling behavior during the past year.

## Risk and Protective Factor Charts

The risk and protective factor charts show the percentage of students at risk and with protection for each of the risk and protective factor scales. The risk and protective factor scales measure specific aspects of a youth's life experience that predict whether he or she will engage in problem behaviors. A definition of each risk and protective factor scale is contained in Table 3. The factors are grouped into four domains: community, family, school, and peer/individual.

represent the percentage of students whose answers reflect significant risk or protection. There are bars for the last three administrations of the NRPFSS: 2003, 2005, and 2007. By looking at the percentage of youth at risk and with protection over time, it is possible to determine whether the percentage of students at risk or with protection is increasing, decreasing, or staying the same. This information is important when deciding which risk and protective factors warrant attention.

## Sources and Places of Alcohol and Cigarette Use Charts

The percentage of students who obtained alcohol and cigarettes from specific sources and the percentage who used alcohol and cigarettes in specific places in the past year is shown in charts for each grade. The percentages are based upon only those students who used alcohol (for alcohol questions) or cigarettes (cigarette questions) in the past year. Also included in the charts is the percentage of students who reported that an adult was present when they last used alcohol or cigarettes.

## How to Read the Charts in this Report (continued)

## **Dots and Diamonds**

The dots on the charts represent the percentage of all of the youth surveyed across Nebraska who reported substance use, problem behavior, elevated risk, or elevated protection. The diamonds represent national data from either the Monitoring the Future Survey or the 8-State Norm (described below). A comparison to the state-wide and national results provides additional information for your community in determining the relative importance of levels of ATOD use, antisocial behavior, risk, and protection. Information about other students in the state and the nation can be helpful in determining the seriousness of a given level of problem behavior. Scanning across the charts, you can easily determine which factors are most (or least) prevalent for your community. This is the first step in identifying the levels of risk and protection that are operating in your community and which factors your community may choose to address.

#### The 8-State Norm

The diamonds on the charts allow a comparison between the levels of risk and protection in your community and a more national sample. The 8-State

Norm value for each risk and protective factor scale represents the percentage of youth at risk or with protection for eight states across the country. In developing the 8-State Norm, the contribution of each of eight states was proportional to its percentage of the national population which helps to make the results more representative of youth nation-wide. A comparison between the ATOD use rates from the 8-State database and those from the national Monitoring the Future Survey showed the rates to be very similar, which provides added confidence in the validity of the 8-State Norm. Brief definitions of the risk and protective factors scales are provided in Table 3 following the profile charts. For more information about risk and protective factors, please refer to the resources listed on the last page of this report under Contacts for Prevention.

## **Drug Free Communities Reports**

Table 14 contains information that needs to be reported by communities with Drug Free Communities Grants such as the perception of the risk of ATOD use, perception of parent and peer disapproval of ATOD use, past 30-day use, and average age of first use.

## Practical Implications of the Assessment

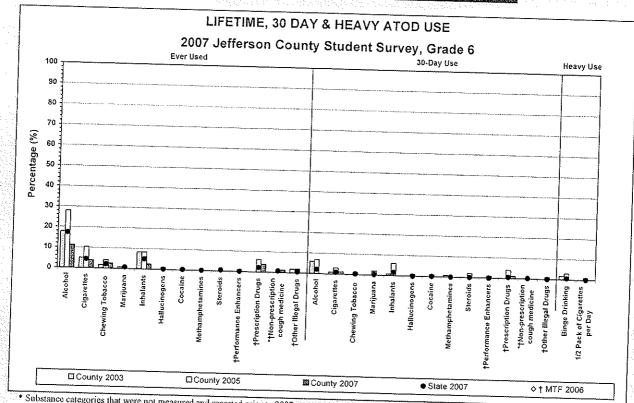
#### No Child Left Behind

The Safe and Drug Free Schools and Communities section of the No Child Left Behind Act (NCLB) requires that schools and communities use six Principles of Effectiveness to guide their decisions and spending on federally funded prevention and intervention programs. First introduced in 1998 by the Department of Education, the Principles of Effectiveness outline a data-driven process for ensuring that prevention programs achieve the desired results. The Principles of Effectiveness stipulate that local prevention programs and activities must:

- 1. be based on a needs assessment using objective data regarding the incidence of drug use and violence,
- 2. target specific performance objectives,
- 3. be based on scientific research and be proven to reduce violence or drug use,
- 4. be based on the analysis of predictor variables such as risk and protective factors,
- 5. include meaningful and on-going parental input in program implementation, and
- 6. have periodic evaluations of established performance measures.

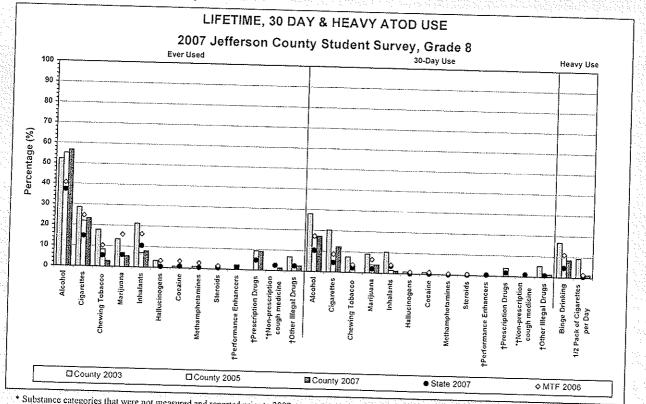
The results of the NRPFSS presented in this report can help your school and community comply with the NCLB Act. The Substance Use and Antisocial Behavior charts provide information related to Principle 1 above. The Risk and Protective Factor charts provide information related to Principle 4. Overall, using the Risk and Protective factors planning framework helps schools meet all of the Principles of Effectiveness, and thereby assists schools in complying with the NCLB Act.

## Substance Use



<sup>\*</sup> Substance categories that were not measured and reported prior to 2007.

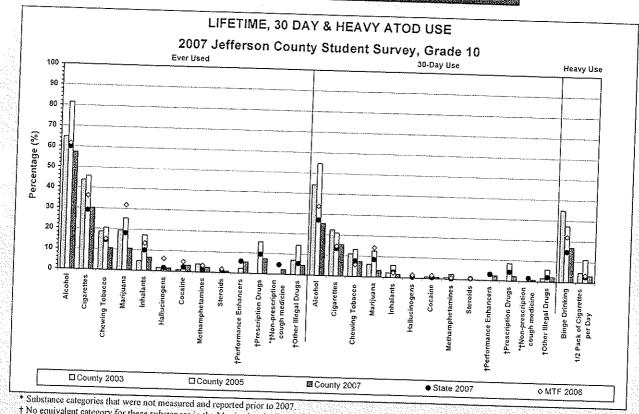
† Monitoring the Future does not survey 6th grade students.

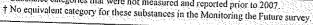


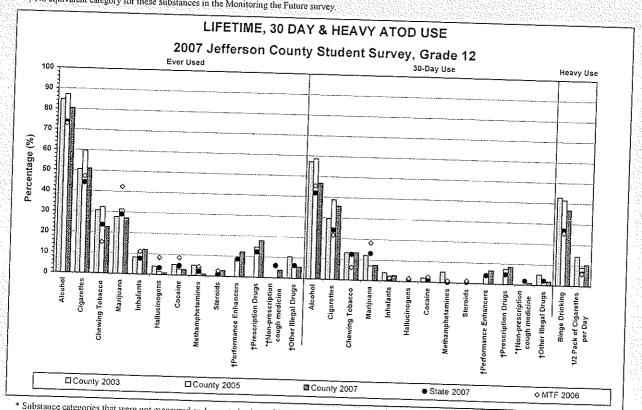
<sup>\*</sup> Substance categories that were not measured and reported prior to 2007.

<sup>†</sup> No equivalent category for these substances in the Monitoring the Future survey.

## Substance Use



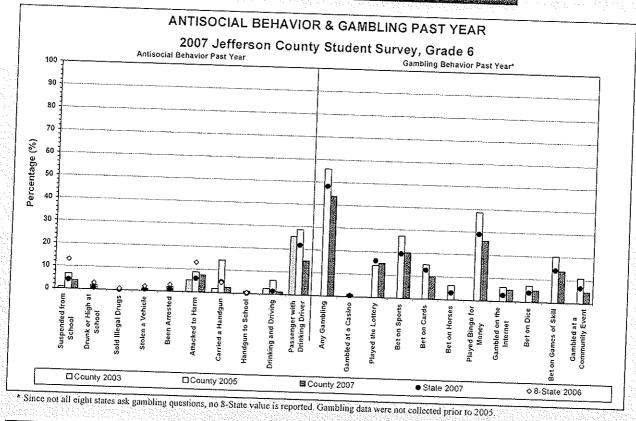


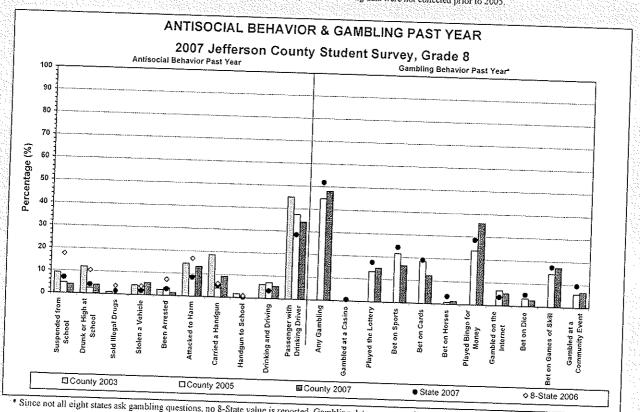


\* Substance categories that were not measured and reported prior to 2007.

<sup>†</sup> No equivalent category for these substances in the Monitoring the Future survey

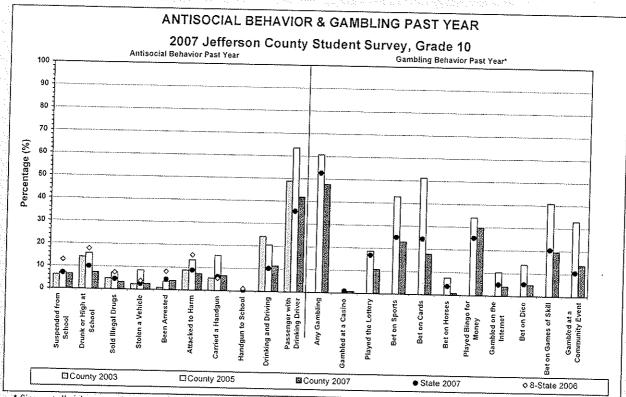
## **Antisocial Behavior and Gambling**



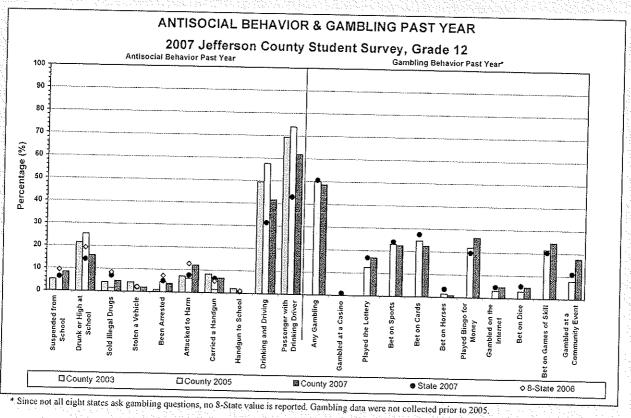


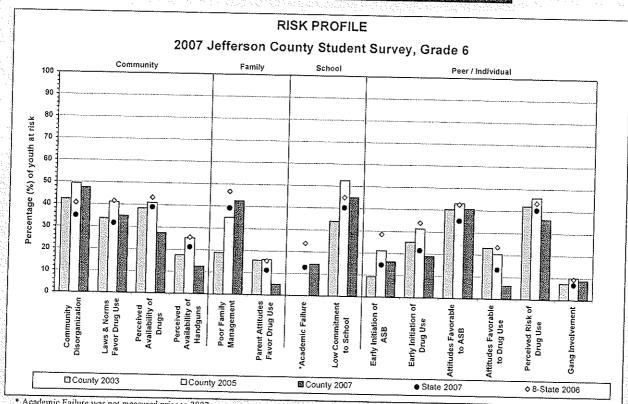
<sup>\*</sup> Since not all eight states ask gambling questions, no 8-State value is reported. Gambling data were not collected prior to 2005.

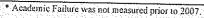
## **Antisocial Behavior and Gambling**

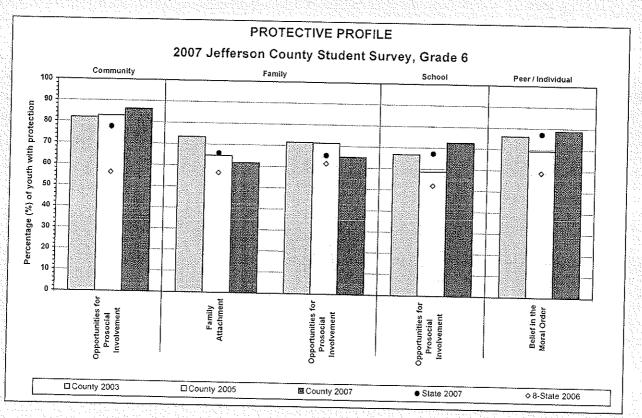


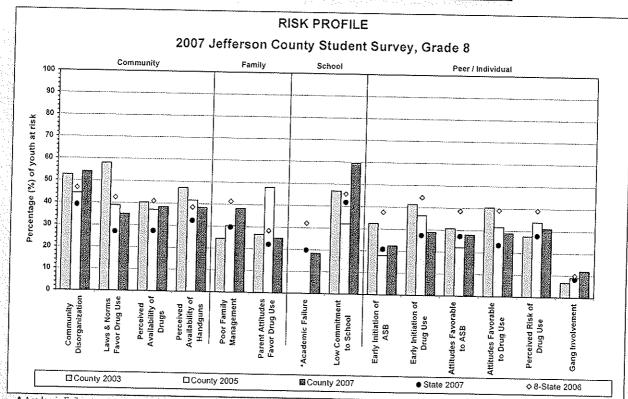
<sup>\*</sup> Since not all eight states ask gambling questions, no 8-State value is reported. Gambling data were not collected prior to 2005.

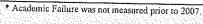


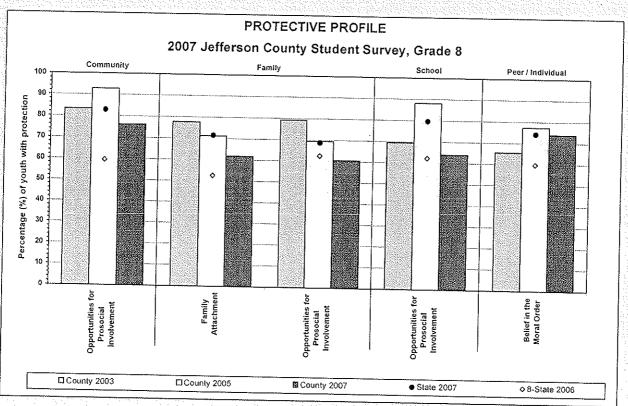


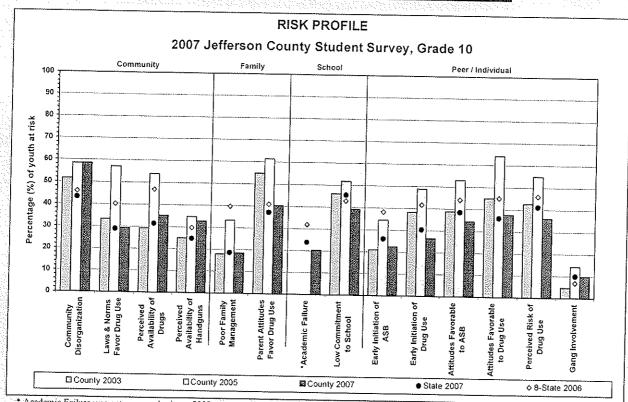


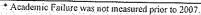


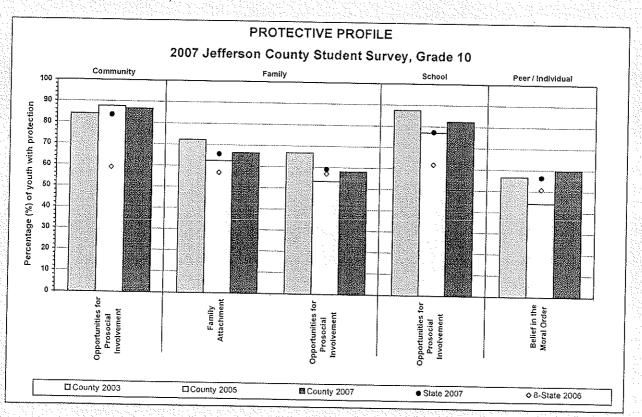


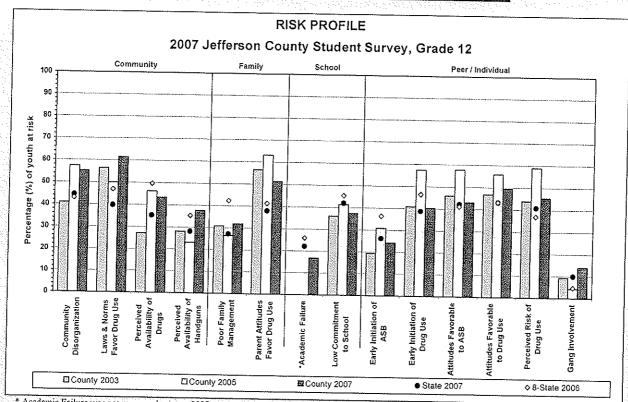


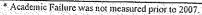


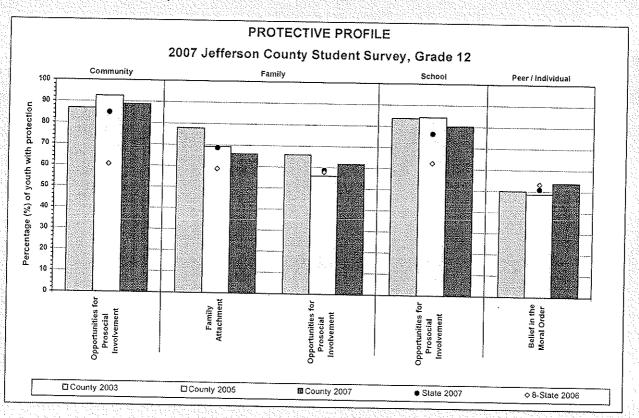


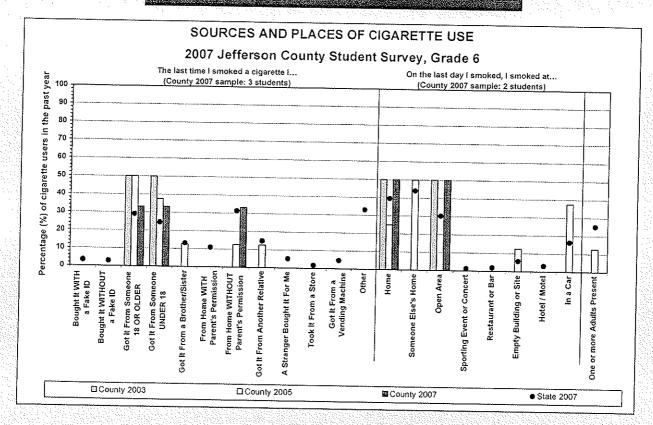


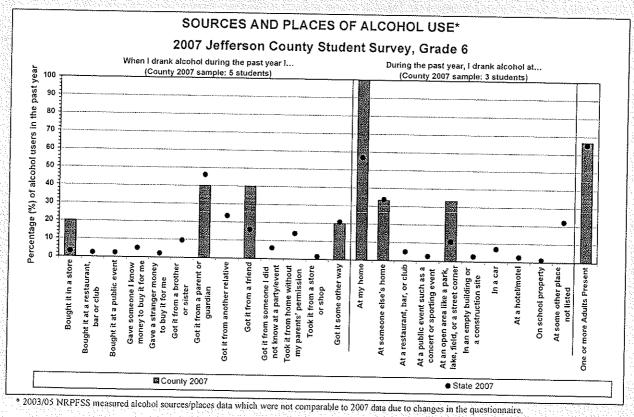


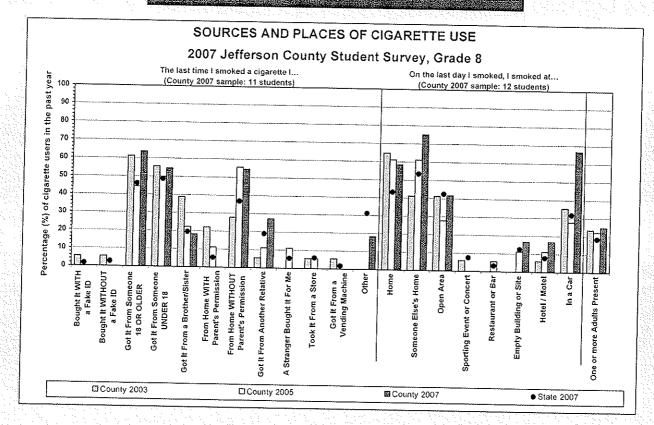


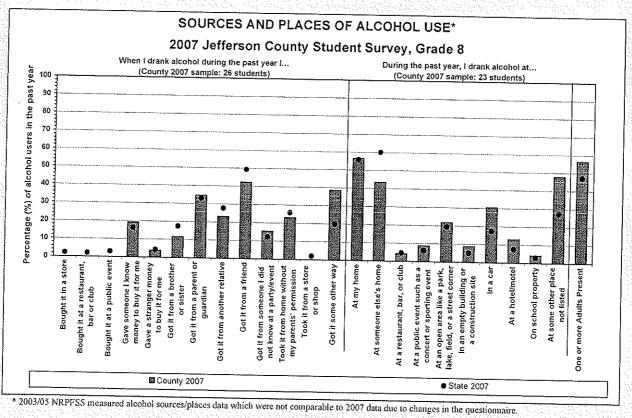


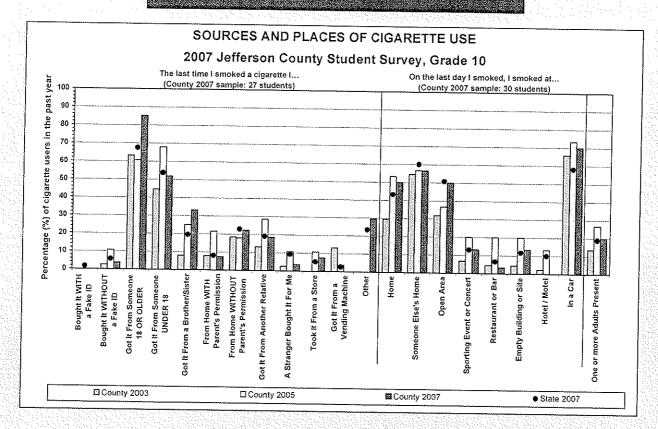


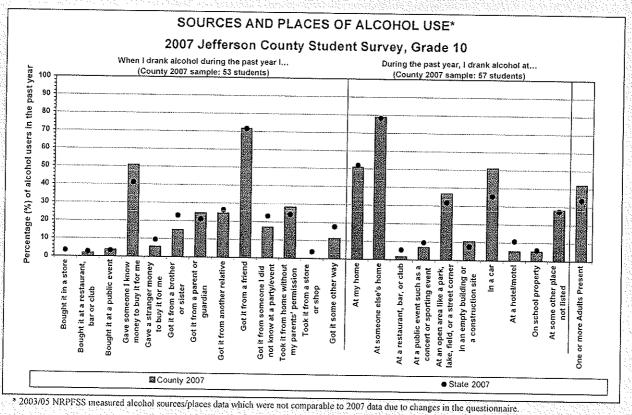


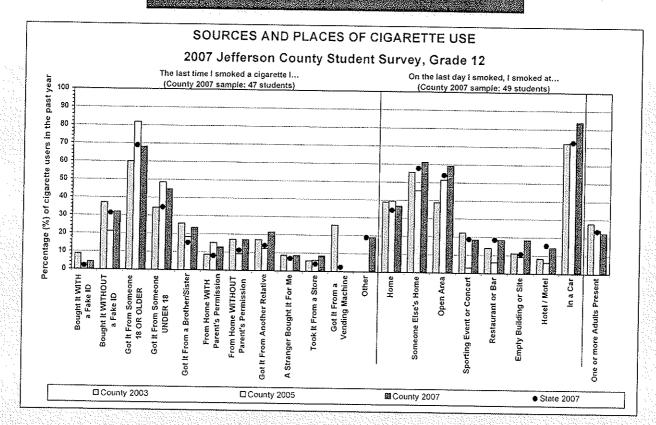


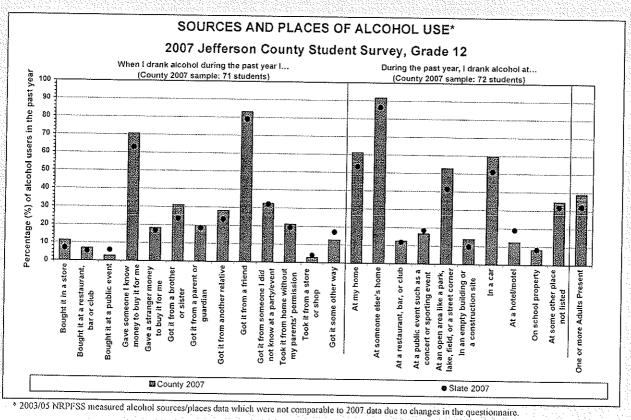












# Risk and Protective Factors

# The Risk and Protective Factor Model of Substance Abuse Prevention

Many states, school districts and local agencies have adopted the Risk and Protective Factor Model to guide their prevention efforts. The Risk and Protective Factor Model of Prevention is based on the simple premise that to prevent a problem from happening, we need to identify the factors that increase the risk of that problem developing and then find ways to reduce the risks. Just as medical researchers have found risk factors for heart disease such as diets high in fat, lack of exercise, and smoking; a team of researchers at the University of Washington have defined a set of risk factors for youth problem behaviors. Risk factors are characteristics of school, community, and family environments, as well as characteristics of students and their peer groups that are known to predict increased likelihood of drug use, delinquency, school dropout, teen pregnancy, and violent behavior among youth. Dr. J. David Hawkins, Dr. Richard F. Catalano, and their colleagues at the University of Washington, Social Development Research Group have investigated the relationship between risk and protective factors and youth problem behavior. For example, they have found that children who live in families with high levels of conflict are more likely to become involved in problem behaviors such as delinquency and drug use than children who live in families with low levels of family conflict.

Protective factors exert a positive influence or buffer against the negative influence of risk, thus reducing the likelihood that adolescents will engage in problem behaviors. Protective factors identified through research include social bonding to family, school, community, and peers; healthy beliefs and clear standards for behavior; and individual characteristics. For bonding to serve as a protective influence, it must occur through involvement with peers and adults who communicate healthy values and set clear standards for behavior.

By measuring risk and protective factors in a population, prevention programs can be implemented that will reduce the elevated risk factors and increase the protective factors. For example, if academic failure is identified as an elevated risk factor in a

community, then mentoring, tutoring, and increased opportunities and rewards for classroom participation can be provided to improve academic performance.

The chart below shows the links between the 19 risk factors and the five problem behaviors. The check marks have been placed in the chart to indicate where at least two well designed, published research studies have shown a link between the risk factor and the problem behavior.

	P	robi	em E	3eha	viors
Youth at Risk	Substance Abuse	Delinguency	Teen Prednancy	School Bron-Out	Violence
Community			() this is		
Availability of Drugs and Firearms	1	1			1
Community Laws and Norms Favorable Toward Drug Use, Firearms and Crime	1	1			/
Media Portrayals of Violence					1
Transitions and Mobility	1	1	1	1	T
Low Neighborhood Attachment and Community Disorganization	1	1			1
Extreme Economic and Social Deprivation	1	1	1	1	1
Family	16		(C)		
Family History of the Problem Behavior	/	1	1	1	1
Family Management Problems	1	1	1	1	1
Family Conflict	1	1	1	1	1
Favorable Parental Attitudes and Involvement in the Problem Behavior	1	<b>✓</b>			1
School					
Academic Failure in Elementary School	✓	1	1	1	1
Lack of Commitment to School	/	1	1	1	1
Peer / Individual		NO.	857		
Early and Persistent Antisocial Behavior	/	1	✓	1	1
Alienation and Rebelliousness	/	/		1	
Friends Who Use Drugs and Engage in a Problem Behavior	/	/	1	1	1
Gang Involvement	1	1			7
Favorable Attitudes Toward Drug Use and Other Problem Behaviors	/	/	1	1	
Early Initiation of the Problem Behavior	/	1	1	1	1
Constitutional Factors	/	1			1

# Building a Strategic Prevention Framework

The Nebraska Risk and Protective Factor Student Survey is an important data source for guiding substance abuse prevention activities and it aligns nicely with the Strategic Prevention Framework (SPF). The SPF is a substance abuse prevention planning model created by the Substance Abuse and Mental Health Services Administration. The five-step SPF model was created to guide states and communities through the process of creating planned, data-driven, effective, and sustainable prevention programs. A summary of the five SPF steps are presented below.

- Step 1: Profile Population Needs, Resources, and Readiness to Address the Problems and Gaps: The SPF begins with an assessment of the needs in the community that are based on data. The NRPFSS is an important data source for helping to accomplish this at the community level. While planning prevention activities, communities are urged to use multiple data sources, including archival and social indicators, assessment of existing resources, key informant interviews, and community readiness.
  - Community Needs Assessment: The NRPFSS results presented in this Profile Report will help you to
    identify needs for prevention activities. NRPFSS data include adolescent substance use, anti-social behavior,
    and many of the risk and protective factors that predict adolescent problem behaviors.
  - Community Resource Assessment: It is likely that existing agencies and programs are already addressing
    some of the prioritized substance abuse problems and identified risk and protective factors. It is important to
    identify the assets and resources that already exist in the community and the gaps in services and capacity.
  - Community Readiness Assessment: It is very important for states and communities to have the commitment and support of their members and ample resources to implement effective prevention efforts. Therefore, the readiness and capacity of communities and resources to act should also be assessed.
- Step 2: Mobilize and/or Build Capacity to Address Needs: Engagement of key stakeholders at the State and community levels is critical to plan and implement successful prevention activities that will be sustained over time. Some of the key tasks to mobilize the state and communities are to work with leaders and stakeholders to build coalitions, provide training, leverage resources, and help sustain prevention activities.
- Step 3: Develop a Comprehensive Strategic Plan: States and communities should develop a strategic plan that articulates not only a vision for the prevention activities, but also strategies for organizing and implementing prevention efforts. The strategic plan should be based on the assessments conducted during Step 1. The Plan should address the priority needs, build on identified resources/strengths, set measurable objectives, and identify how progress will be monitored. Plans should be adjusted with ongoing needs assessment and monitoring activities.
- Step 4: Implement Evidence-based Prevention Programs and Infrastructure Development Activities: By measuring and identifying the risk factors and other causal factors that contribute to the targeted problems specified in your strategic plan, programs can be implemented that will reduce the prioritized substance abuse problems. After completing Steps 1, 2, and 3, communities will be able to choose prevention strategies that have been shown to be effective, are appropriate for the population served, can be implemented with fidelity, are culturally appropriate, and can be sustained over time. The Western Center for the Application of Prevention Technology has developed an internet tool located at <a href="http://casat.unr.edu/bestpractices/search.php">http://casat.unr.edu/bestpractices/search.php</a> for identifying Best Practice Programs. Another resource for evidence-based prevention practices is SAMHSA's National Registry of Evidence-based Programs and Practices <a href="https://www.nrepp.samhsa.gov">www.nrepp.samhsa.gov</a>.
- Step 5: Monitor Process, Evaluate Effectiveness, Sustain Effective Programs/Activities, and Improve or Replace Those That Fail: Finally, ongoing monitoring and evaluation are essential to determine if the desired outcomes are achieved, assess service delivery quality, identify successes, encourage needed improvement, and promote sustainability of effective policies, programs, and practices. The NRPFSS allows communities to monitor levels of ATOD use, antisocial behavior, risk, and protection.

## **Tools for Assessment and Planning**

## School and Community Improvement Using Survey Data

# Why Conduct the Risk and Protective Factor Survey?

Data from the Nebraska Risk and Protective Factor Student Survey can be used to help schools and communities assess current conditions and identify and prioritize local prevention issues. The risk and protective factor profiles provided by this survey reflect underlying conditions that can be addressed through specific types of interventions that have been proven to be effective in either reducing risk(s) enhancing protection(s).

## What are the numbers telling you?

Review the charts and data tables presented in this report. Using the table below, note your findings as you discuss the following questions.

- Which 3-5 risk factors are of the greatest concern?
- Which 3-5 protective factors are your community's highest priority?
- Which levels of 30-day drug use are of greatest concern?
  - o Which substances are your students using the most?
  - o At which grades do you see unacceptable usage levels?
- Which levels of antisocial behaviors are of greatest concern?
  - O Which behaviors are your students exhibiting the most?
  - O At which grades do you see unacceptable behavior levels?

### How to decide if a rate is "unacceptable."

- Look across the charts which items stand out as either much higher or much lower than the others?
- Compare your data with statewide and national data differences of 5% between local and other data are probably significant.
- Determine the standards and values held within your community For example: Is it acceptable in your community for a percentage of high school students to drink alcohol regularly as long as that percentage is lower than the overall state rate?

### Use these data for planning.

- Substance use and antisocial behavior data identify issues, raise awareness about the problems, and promote school and community dialogue.
- Risk and protective factor data identify key objectives that will help your school or community achieve its prevention goals.
- The SPF planning model guides your prevention planning process. Use the resources listed on the last page of this report, *Contacts for Prevention*, for ideas about prevention programs that have proven effective in addressing the risk factors that are high in your community and improving the protective factors that are low.

### **MEASURE**

Risk Factors
Protective Factors
Substance Use
Antisocial Behaviors

	Unacceptable Rate #1	Unacceptable Rate #2	Unacceptable Rate #3	Unacceptable Rate #4
N. N.				

# Risk and Protective Scale Definitions

	Community Domain Risk Factors
Community Disorganization	Research has shown that neighborhoods with high population density, lack o natural surveillance of public places, physical deterioration, and high rates o adult crime also have higher rates of juvenile crime and drug selling.
Laws and Norms Favorable Toward Drug Use	Research has shown that legal restrictions on alcohol and tobacco use, such as raising the legal drinking age, restricting smoking in public places, and increased taxation have been followed by decreases in consumption. Moreover, national surveys of high school seniors have shown that shifts in normative attitudes toward drug use have preceded changes in prevalence of use.
Perceived Availability of Drugs and Handguns	The availability of cigarettes, alcohol, marijuana, and other illegal drugs has been related to the use of these substances by adolescents. The availability of handguns is also related to a higher risk of crime and substance use by adolescents.
	Community Domain Protective Factors
Opportunities for Positive Involvement	When opportunities are available in a community for positive participation, children are less likely to engage in substance use and other problem behaviors.
	Family Domain Risk Factors
Parental Attitudes Favorable Toward Antisocial Behavior & Drugs	In families where parents use illegal drugs, are heavy users of alcohol, or are tolerant of children's use, children are more likely to become drug abusers during adolescence. The risk is further increased if parents involve children in their own drug (or alcohol) using behavior, for example, asking the child to light the parent's cigarette or get the parent a beer from the refrigerator.
Poor Family Management	Parents' use of inconsistent and/or unusually harsh or severe punishment with their children places them at higher risk for substance use and other problem behaviors. Also, parents' failure to provide clear expectations and to monitor their children's behavior makes it more likely that they will engage in drug abuse whether or not there are family drug problems.
	Family Domain Protective Factors
Family Attachment	Young people who feel that they are a valued part of their family are less likely to engage in substance use and other problem behaviors.
Opportunities for Positive Involvement	Young people who are exposed to more opportunities to participate meaningfully in the responsibilities and activities of the family are less likely to engage in drug use and other problem behaviors.

# Risk and Protective Scale Definitions

	School Domain Risk Factors
Low Commitment to School	Surveys of high school seniors have shown that the use of hallucinogene cocaine, heroin, stimulants, and sedatives or nonmedically prescribe tranquilizers is significantly lower among students who expect to attend colleg than among those who do not. Factors such as liking school, spending time of homework, and perceiving the coursework as relevant are also negatively related to drug use.
	School Domain Protective Factors
Opportunities for Positive Involvement	When young people are given more opportunities to participate meaningfully in important activities at school, they are less likely to engage in drug use and other problem behaviors.
	Peer-Individual Risk Factors
Early Initiation of Antisocial Behavior and Drug Use	Early onset of drug use predicts misuse of drugs. The earlier the onset of any drug use, the greater the involvement in other drug use and the greate frequency of use. Onset of drug use prior to the age of 15 is a consisten predictor of drug abuse, and a later age of onset of drug use has been shown to predict lower drug involvement and a greater probability of discontinuation of use.
Attitudes Favorable Toward Antisocial Behavior and Drug Use	During the elementary school years, most children express anti-drug, anti- crime, and pro-social attitudes and have difficulty imagining why people use drugs or engage in antisocial behaviors. However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behavior, their attitudes often shift toward greater acceptance of these behaviors. Youth who express positive attitudes toward drug use and antisocial behavior are more likely to engage in a variety of problem behaviors, including drug use.
Perceived Risk of Drug Use	Young people who do not perceive drug use to be risky are far more likely to engage in drug use.
Gang Involvement	Youth who belong to gangs are more at risk for antisocial behavior and drug use.
	Peer-Individual Protective Factors
Social Skills	Young people who are socially competent and engage in positive interpersonal relations with their peers are less likely to use drugs and engage in other problem behaviors.
Belief in the Moral Order	Young people who have a belief in what is "right" or "wrong" are less likely to use drugs.

			Gra	Grade 6			Grade 8	de 8			Grac	Grade 10		The second second second	Č	2000	
Number of Youth		County 2003	County 2005	County 2007	State 2007	County 2003	County 2005	County 2007	State 2007	County 2003	County	County 2007	State	County	County	County	State
		121	106	88	6511	119	136	7.5	0400	,	[		507	2002	2007	7007	7007
Table 5. Percentage	Table 5. Percentage of Students Who Used ATODs During	£	ifetime				3		0100	R)	ĺβ	125	8731	88	70	107	7616
In your lifetime, on how many occasions	. anoiseano Mam Mo		Grac	Grade 6			Grade 8	le 8			Sag	Grade 10				3	N.
(if any) have you: (Or	(if any) have you: (One or more occasions)	County	County	County	State	County	County	County	State	County	County	) doi:iop	Choto	,	5	Glade 12	
		2003	2005	2007	2007	2003	2005	2007	2007	2003	2005	2007	2007	2003	Sounty 2005	County 2007	State 2007
Aicohol	had alcoholic beverages (beer, wine or hard liquor) to drink - more than just a few sips?	17.8	28.0	11.2	17.4	52.1	55.0	56.6	37.2	64.8	81,4	57.3	59.9	84.7	87.1	80.4	73.7
Cigarettes	smoked cigarettes?	5.0	10.3	3.8	4.4	28.6	21.9	23.3	14.8	43.8	45.8	30.1	20.0	202	100	C	
Chewing Tobacco	used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco)?	1.7	4.1	2.5	2.1	17.8	8.3	2.7	5.5	18.6	20.5	10.6	14.5	30.6	32.3	22.6	23.6
Marijuana	used marijuana (grass, pot) or hashish (hash, hash oil)?	0.8	1.0	0.0	0.8	13.4	6.9	5.3	5.8	19.4	25.3	10.6	18.1	27.6	31.3	27.1	28.9
Inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high?	8.4	8.3	2.5	5.0	21.2	7.0	7.9	10.5	4.7	17.3	6.5	10.0	8.2	10.4	12.1	7.7
Hallucinogens	used LSD or other hallucinogens?	0.0	1.0	0.0	0.2	3.4	0.8	0.0	2.0	ď	0		ŗ				
Cocaine	used cocaine or crack?	0.0	1.0	0.0	0.3	80	00		3 3	2 6	3 (	<u>•</u>	3	4-1	1.5	6.9	3.3
Methamphetamines	used methamphetamines (meth, speed, crank, crystal meth)?	0.0	0.0	0:0	1.0	6.0	0:0	0.0	0.5	3.9	2.5	3.2	23	5.1	3.0	2.8	4.6
Steroids	used steroids without a doctor telling you to take them?	n/a	0:1	0.0	9.0	ιVa	1.6	0.0	9.0	n/a	0.0	0.8	1,2	ν/a		δ, α	7 0
Performance Enhancers	used performance enhancing drugs other than steroids (ephedrine, EPO, creatine, DHEA, or diuretics) without a doctor telling you to take them?	n/a	1.0	0.0	0.1		2,3	0.0	7	n/a	2.4	5.6	5.8	1/9	80.	12.1	9.9
Prescription Drugs	used prescription drugs (such as Valium, Xanax, Ritalin, Adderall, Oxycontin or sleeping pills) without a doctor telling you to take them?	n/a	6.2	3.8	22	n/a	ون دي	9.2	6.4	n/a	15.5	7.3	9.5	n/a	14.7	17.9	12.4
Non-prescription cough medicine*	used a non-prescription cough or cold medicine (robos, DMX, etc.) to get high and not for medical reasons?	n/a	n/a	1.2	0.8	n/a	n/a	1.3	2.5	n/a	:v/a	2.4	4.7	n/a	e/u	3.7	6.0
Other Illegal Drugs	used other illegal drugs?	1.7	2.0	0.0	0.5	6.9	16	26	25	0 2	2,5		1				
* Substance categories tha	<ul> <li>Substance categories that were not measured and reported prior to 2007.</li> </ul>	2007.						- 3		?;	(†)	4.8	0.5	10.4	5.0	C)	6.0

County   County   County   County   State   County   State   County   State   County   State   County   Count	in the past 30 days, or	In the past 30 days, on how many occasions		Çī	Grade 6			විව	Grade 8			Grac	Grade 10			Gra	Grade 12	
but discipled between gas given. winder of many and all	(if any) have you: (On	e or more occasions)	County 2003	County 2005	County 2007	State 2007	County 2003	County 2005	County 2007	State 2007	County 2003	County 2005	County 2007	State 2007	County 2003	County 2005		State 2007
Second colored classes tokacoo (chew, snuff)	Alcohol	had alcoholic beverages (beer, wine or hard liquor) to drink - more than just a few sips?	9.9	6.9	0.0	2.1	28.0	16.3	17.1	10.3	44.2	54.7	25.4	27.1	57.1	58.6	46.7	41.8
Pugat strongletises behaviory content survival by the page strongletises behaviory cheeve survival by the page strongletises behaviory cheeve survival by the page strongletises behaviory cheeves survival by the page strongletises behaviory called the page strongletises behaviory call	Cigarettes	smoked cigareftes?	0.8	3.0	1.2	0.9	20.3	8.7	12.3	4.7	22,5	21.0	15.4	13.4	20.6	388	35.8	7 80
Secretary   Part   Pa	Chewing Tobacco	used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco)?	0.0	1.0	0.0	0,4	7.6	3.3	0.0	2.2	10.9	13.1	7.3	972	13.3	11.8	13.3	12.5
an aerosol spray can, or inhaled other and an aerosol spray can, or inhaled other spray can, or inhaled other and are acceles pray can, or inhaled other and are acceles pray can, or order to get high?  Se dases or spray, an order to get high?  Se dases or spray, an order to get high?  Se dases or spray, an order to get high?  Se dases or spray, an order to get high?  Se dases or spray, an order to get high?  Se dases or spray, an order to get high?  Se dases or spray, an order to get high?  Se dases or spray can, order hallucinogens?  So dase or dase high.  Se dase or can, order hallucinogens?  So dase or can, or c	vfarijuana	used marijuana (grass, pot) or hashish (hash, hash oil)?	0.0	2.0	0.0	0.3	9.2	4.0	3.9	2.1	6.2	12.6	3.3	8.5	12.2	7.1	7.5	13.2
Seed LSD or other hallucinogene?   0.0   1.0   0.0	nhalants	snifted glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high?	0.8	0.9	0.0	9:	10.3	1.6	<u>د</u> .	3.6	2.3	5.9	1.6	2.7	4.	0.0	2.8	4.1
Used cocaline of clack?	fallucinogens	used LSD or other hallucinogens?	0.0	1.0	0.0	0.0	6.0	0.0	0.0	0,1	0.0	1.2	0.0	0.5	0.0	0.0	0.0	~
sed used methamphetamines (meth. speed)         0.8         0.0	ocaine	used cocaine or crack?	0.0	1.0	0.0	0.1	6.0	0.0	0.0	0.3	9.0	1.2	9.0	9.0	2.0	0.0	0.0	-
used steroids without a doctor telling you to take them?         r/a         1.0         0.0         0.1         r/a         0.0         0.0         0.3         n/a         0.0	Aethamphetamines	used methamphetamines (meth, speed, crank, crystal meth)?	0.8	0.0	0.0	0.0	0.0	0.0	0.0	0.1	8.0	2.4	0.0	0.3	5.2	0.0	0.0	0.3
used performance enhancing drugss other than steroids (ephedrine, EPO, or directics) without a doctor telling you to take them?         n/a         1.0         0.0         0.0         n/a         0.0         2.4         3.0         n/a         4.3         6.5           octoor telling you to take them?         n/a         4.0         1.2         0.0         1.8         n/a         4.0         1.2         0.0         1.8         n/a         4.3         n/a         3.4         3.4         4.3         n/a         8.5         2.4         4.3         n/a         8.5         8.5         1.4         4.3         n/a         8.5         1.0         1.0         1.0         1.0         1.0         1.0         1.0         1.0         1.0         1.0         1.0         1.0         1.0         1.0	Xeroids	used steroids without a doctor telling you to take them?	n/a	2.0	0.0	0.1	n/a	0.0	0:0	0.3	n/a	0.0	0:0	0.6	n/a	0.0	0.0	0.5
used prescription drugs (such as Valium, Xanax, Ritalin, Adderall, Oxyconnin or sleeping pills) without a doctor telling you to take them?         n/a         4.0         1.2         0.6         n/a         4.0         1.2         0.6         1.8         n/a         4.3         n/a         7.4         8.5           boxpoonin or sleeping pills) without a doctor telling you to take them?         1.0         1.2         0.0         1.3         1.6         1.0         1.6         1.6         1.6         1.6         1.6         1.6         1.6         1.6         1.6         1.9	erformance inhancers	used performance enhancing drugs other than steroids (ephedrine, EPO, creatine, DHEA, or diuretics) without a doctor telling you to take them?	ηVa	1.0	0.0	0.0	r/a	9.0	0.0	0.5	n/a	0.0	2.4	3.0	n/a	4.3	6.5	4.1
used a non-prescription cough or cold medicaire (robos. DMX, etc.) to get high and not for medicair easons?         n/a	rescription Drugs	used prescription drugs (such as Valium, Xanax, Ritalin, Adderall, Oxycontin or steeping pills) without a doctor telling you to take them?	n/a	4.0	1.2	9.0	n/a	4.0	0.0	1.8	n/a	8.5	2.4	6.4	n/a	7.4	8.5	4.8
used other illegal drugs? 0.0 1.0 0.0 0.1 5.3 0.0 1.3 0.9 1.6 6.0 2.4 2.2 5.2 0.0 1.9	on-prescription ough medicine*	used a non-prescription cough or cold medicine (robos, DMX, etc.) to get high and not for medical reasons?	n/a	n/a	0.0	0.3	17/3	n/a	0.0	1.0	n/a	n/a	8.0	1.6	n/a	υ/a	0.9	1.9
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Wher Illegal Drugs	used other illegal drugs?		1.0	0.0	0.1	5.3	0.0	1.3	6.0	1.6	6.0	2.4	2.2	5.2	000	10	22

# Data Tables

:			ö	Grade 6			ΰ	Grade 8		L	Gra	Grade 10			٤	5	
Heavy Use		County 2003	County	County 2007	State 2007	County	County	County	State	County	ड		State	County	County	orace 12	<u> </u>
	How many times have you				3	Cnox	2007	2007	7007	2003	-	2007	2007	2003	2005	2007	2007
Binge Drinking	had 5 or more alcoholic drinks in a row in the past 2 weeks?	1.7	3.0	0.0	0.7	16.8	10.7	8.5	4.7	34.9	27.2	16.8	14.7	42.9	41.5	36.7	26.8
One-Half Pack of Cigarettes/Day	During the past 30 days, have you smoked a half a pack of cigarettes a day or	0.0	1.0	0.0	0.1	9.3	0.8	1.4	0.6	4.7	17.	3.3	2.7	14.3	9.0	10.4	
Ten or reserved	Jaion																
lable of Percental	lable or recentage of Students With Antisocial Behavior in the Past Year	social Be	havior ir	the Pas	Year											2022/2022/2022	3000
How many times in the past year	in the past year		Gia	Grade 6			Gra	Grade 8		L	S.	Grade 10		280000000000000000000000000000000000000		,	
(12 months) have you:	you:	County	County	County	State	County	, del 10	100	Charle		5	ź		)	Grad	Grade 12	
(One or more times)	es)	2003	2005	2007	2007	2003	2005	2007	2007	2003	Sounty 2005	County 2007	State 2007	County 2003	County	County	State
Been suspended from school	rom school	0.8	6.7	3.8	4.1	9.2	4.7	4.0	7.0	6.3	1	9 9	7.0		2007	7007	4
Been drunk or high at school	at school	0.0	1.9	0.0	0.7	11.9	2.5	3.9	40	141	15.7	7.0	9.0	0, 2	0.0	8.4	_[
Sold illegal drugs		0.0	0.0	0.0	0.1	0.9	0.0	0.0	13	4 7	7.3	3.3	10.0	41.4	25.4	15.9	14.1
Stollen or thed to st	Stolen of thed to steal a motor vehicle	0.0	1.0	0.0	9.0	4.2	2.3	5.3	17	23	8.5	2.5	3.5	j ,	C. C	4.7	_[
Been arrested		0.0	2.0	0.0	6.0	2.5	3.3	1.3	29	0.8	3.6	Z 4	0.7	4, 4	0.0	1.9	_
Attacked someone with the idea	with the idea	יני	α	7.5	0.3	4	3	,	; ;	25		ř	4.0	2:	φ. Ω.	3.7	
of seriously hurting them	them	3	9	J.	0.0	0.4.0	 	13.2	8,4	8.7	13.3	7.4	8.8	7.2	6.2	12.1	
Carried a nandgun		1.7	14.3	2.5	4.8	18.6	3.9	9.2	5.2	5.5	15.5	6.6	62	8.2	7	2 3	
Callieu a randoun to school	to school	0.0	1.0	0.0	0.1	1.7	0.0	0.0	0,3	0.0	0.0	00	0.4	200	2	0 0	
Drivers are drinking alcohol	galconol	2.5	6.1	1.2	1.4	6,1	7.0	5.3	3.4	24.2	20.5	113	10.7	70 8	0.0	2.0	7
been a passenger with drinking driver	with drinking driver	25.6	28.7	15.0	21.9	45.1	37.5	34.2	28.5	48.8	63.5	418	35.5	43.3	0.70	U 12	31.5
Table 9. Percentag	able 9. Percentage of Students Gambling in the Past Year*	in the Pa	ist Year									2	200	4.50	(3.9	01./	43.0
How many times in the past year	n the past year		Grade 6	9 aş			Grade 8	e 8			Grad	Grade 10	Γ		Croport	45	
(12 months) have you:	you:	County	County	County	State	County	County	Complex	Ototo	1				-	ž	77.	
('A few times' or more)	nore)	2003	2005	2002	2007	2003	2005	2007	2007	2003	2005	Sound 2007	State	County	County	County	State
Gambled in the past year	st year	e/u	55.8	43.8	48.2	e/u	44.7	48.0	512	2/4	203	1	1007	5007	SUU2	7007	) P
Gambled at a casino	0	n/a	1.0	0.0	0.5	7,0	00	200	9 0	2 4	7.00	0.74	977.0	u/a	20.0	48.6	50.6
Played the lottery		n/a	14.1	15.0	16.1	n/a	13.3	14.9	17.4	2/2	10.0	200	6.0	Na Na	00	0:0	0.9
Bet on sports		n/a	27.3	20.0	19.5	n/a	216	16.4	24.7	2 6	2 5	2.00	2016	g .	12.5	16.8	16.8
Bet on cards		n/a	15.1	10.0	12.7	n/a	18.5	123	100	5	142.3	25.0	0.00	eg.	23.0	22.4	24.0
Bet on horses		n/a	6.3	0.0	3.1	e/u	80	73	2 %	2 2	2 2	2 0	C. 2.	g.	24.6	22.4	27.5
Played bingo for money	ney	n/a	38.6	26.2	29.1	n/a	23.9	98.0	286	0 0	5.70	0.0	S 5	Sa.	3	6.0	3.6
Gambled on the internet	ernet	n/a	6.2	5.1	2.7	e/u	99	5.4	2 6	g 5	3 5	72.0	200	n/a	77.0	26.4	**
Bet on dice		n/a	7.1	5.0	4.1	e/u	3.4	27	2 1	0/0	5.0.5	- 4	0.0	n/a	3.1	4.8	4.8
Bet on games of skill	==	n/a	20.2	13.8	14.2	n/a	14.5	17.3	17.5	0/2	40 E	2,40	5.0	n/a	3.0	4.8	5.4
Combined of a familiar in the contraction of the familiar in the contraction of the contr									•		•				7 * 1		

# Data Tables

KISK Factor		-				Cra	Grade 8			Grao	Grade 10			Ë	Grade 12	
	County 2003	County 2005	County 2007	State 2007	County 2003	County	County 2007	State 2007	County	County	County	State	County	S	County	State
Community Domain							7007	7007	2002	CM2	7007	2007	2003		_	
Community Disorganization	42.3	49.4	47.5	340	202	7 77	2 4 2	000	10 72							
Laws & Norms Favor Drug Use	33.7		L	24.7	70.40	5 6	8	7.60	51.6	58.4	58.5	43.3	40.9	57.4		
Perceived Availability of Duras	38.4		37.0	3	ġ ġ	200	53.1	27.1	33.3	57.1	29.3	28.9	56.4	50.0		
Perceived Availability of Handouns	17.6		$\perp$	0.80	40.4	37.1	38.4	27.5	29.3	53.9	35.2	31.4	27.1			
Family Domain				S: 7	41.7	41.5	38.4	32.4	25.0	24.7	32.8	24.8	28.1	23.1	37.7	28.2
Poor Family Management	189	349		202	7.70	000	0.00	3								
Parent Attitudes Favor Dura I lea	, r		7.7	23.5	24.4	30.3	38.2	29.7	17.9	33.3	18.5	18.6	30.8	26.5	31.8	27.2
School Domain	(3.0		9.0	71.3	9.97	47.9	25.0	22.1	54.8	61.3	40.3	37.2	56.5		51.4	
Academic Failure*	6/0	c/u	143	40.0												
Low Commitment to School	37.0		1 5	57.3	e S	E S	18.4	19.8	n/a	e/u	20.3	23.9	eл	n/a	16.8	22.1
Peer-Individual Domain			4.0	40.4	40.9	32.1	28.5	41.8	46.1	51.8	39.2	45.6	36.1	41.4	37.4	42.0
Early Initiation of ASB	0.3	24.2	16.34	7.1.4	1.500	Ţ										
Early Initiation of Drug Use	25.2	3 24 34	10.4 40.0	2 2	27.5	8.7	27.4	20.8	70.9	34.6	22.4	26.0	19.4	30.8	24.3	26.2
Attitudes Favorable to ASB	40.2	43.0	40.5	35.2	1,166	9,00	5.07	27.2	38.3	48.8	26.4	30.4	40.8	57.4	40.2	38.8
Attitudes Favorable to Drug Use	23.1	20.4	5.3	45.4	200	7.77	0.07	7.17	38.8	53.0	34.4	38.5	45.9	57.8	43.0	42.2
Low Perceived Risk of Drug Use	42.2		36.2	40.5	27.6	32.0	24.4	43.4	45.0	<u>2</u>	37.6	36.0	46.9	55.9	49.5	43.2
Gang Involvement	7.4		:	2 0	2,7	5.50	7.10	21.2	47.6	55.0	36.1	41.2	43.9	58.9	45.3	40.9
Table 11 Percentano of Children December 1	1.1		0.0	6.9	٥,/	8.9	12.0	8.3	4.7	14.3	9.9	10.0	9.2	4.3	14.0	10.01
Today supanno o agrico de como	ung Protect	í.														
Protective Eactor	-	Grade 6	de 6		-	Grade 8	e 8			Grade 10	÷ 10			Grac	Grade 12	% (ASST-405)
	County 2003	County 2005	County 2007	State 2007	County 2003	County 2005	County 2007	State 2007	County 2003	County	County 2007	State	County	County	County	State
Community Domain						1			4				2002	2002	7007	Z007
Opportunities for Prosocial Involvement	819	82.8	86.2	77.6	83.3	92.7	76.1	808	0.78	2 20	000	000				
Family Domain							<u>.</u>	02:30	2:50	7.70	Q.00 0	83.5	86.8	92.6	88.7	84.9
Family Attachment	73.4	64.7	61.5	65.8	77.6	71.2	818	715	70.01	200	, 33	2.5				
Opportunities for Prosocial Involvement	71.6	71.3	65.0	65.5	79.2	₽ 69	60.5	68.7	2.23	0.20	4.00	7.00	8:	69.2	96.0	68.6
School Domain							2.22	3	7.00	4.50	700	28.1	6.00	55.9	61.7	58.7
Opportunities for Prosocial Involvement	2.99	58.7	72.5	67.2	69.5	88.1	64.0	70.6	97.5	77.01	200	0				
Peer-Individual Domain							2	2.5.1	3.70	0.17	02.3	7.77	83.7	84.3	80.2	76.5
Belief in the Moral Order	76.0	69.2	78.8	77.0	65.5	77.3	74.0	744	0 00				l			

# Data Tables

			Grade 6													
The fact time I amount a second		L	2			5	Grade 8			Gra	Grade 10			Grac	Grade 12	
and the I stroked a cigarette I	2003	2005	County 2007	State 2007	County 2003	County 2005	County 2007	State 2007	County	County	County	State	County	County	County	State
Sample size*	2	8	3	175	18	40				2000	2007	2007	7003	2002	2007	2007
Bought it WITH a fake ID	0.0	C	000	2	2 (	0	1,	ŝ	38	88	27	1861	35	33	47	2537
Bought it WTHOUT a fake ID	00	6	0.0	200	0.0	0.0	0.0	1.7	0.0	0:0	0.0	1.7	8.6	3.0	4.3	2.0
Got it from someone 18 OR OLDER	50.0	50.0	33.3	20.1	0.0	0.0	0.0	2.7	2.6	10.7	3.7	5.8	37.1	21.2	31.9	31.3
Got it from someone UNDER 18	50.0	37.5	33.3	24.6	55.5	44.4	53.5	46.1	63.2	60.7	85.2	9'29	60.0	81.8	68.1	69.0
Got it from a brother/sister	0.0	12.5	0.0	13.1	20.00	0.00	0.40	48.7	44.7	67.9	51.9	53.8	34.3	48.5	44.7	34.6
From home WITH parent's permission	0.0	00		2 0	8.00	777	18.2	19.5	7.9	25.0	33.3	19.6	25.7	18.2	23.4	15.1
From home WITHOUT parent's permission	6	12.5	33.0	57.5	7777	13.7	0.0	5.4	7.9	21.4	7.4	8.1	8.6	15.2	12.8	8.0
Got it from another relative		12.5	2.2.2	4.50	8.12	55.6	54.5	36.9	18.4	17.9	22.2	22.9	17.1	9.1	17.0	11.1
A stranger bought it for me		3 6	3	9.4	9.0	13.1	27.3	19.0	13.2	28.6	18.5	19.1	17.1	12.1	24.3	130
Took if from a store	2.0	0.0	0.0	5.1	0.0	11.1	0.0	5.5	2.6	10.7	3.7	9.3	8.6	00	8.5	200
Got It From a Vending Machine	0.0	0.0	0.0	1.7	5.6	5.6	0.0	5.9	0.0	10.7	7.4	5.3	57	2	ξ α	9 6
Chor	0.0	0.0	0.0	4.6	5.6	0.0	0.0	1.7	13.2	3.6	00	26	75.7		3 6	r c
ORIGI	n/a	n/a	0.0	33.1	e/u	n/a	18.2	31.2	e)C	2/2	300	23.50		? .	2	7.4
		Grade 6	Je 6			Grade 8	× 4			2		50.5	7/a	n/a	19.1	19.0
On the last day I smoked I smoked at	100	14	6			5	2			Srade	Je 10			Grade 12	e 12	
and a suroved, I suroved at	2003	2005	2007	State 2007	County	County	County	State	County	County	County	State	County	County	County	State
Sample size*	٥	٦	,	Ş	1		1337	) N	2003	2002	2007	2007	2003	2005	2002	2007
Home	50.02	25.0	702	600		8 3	12	818	44	30	30	1845	36	33	49	2488
Someone else's home	0.0	5005	3 6	33.0	2 2	0.7	58.3	43.3	29.5	53.3	50.0	43.3	38.9	39.4	36.7	34.3
Open area	50.0	00	2002	S C	7 7 7	0 6	73.0	53.5	54.5	56.7	56.7	60.2	55.6	45.5	61.2	57.8
Sporting event or concert	0.0	000	0.00	1 2	7.7	8.12	41.7	42.5	31.8	36.7	50.0	50.8	38.9	51,5	59.2	54.0
Restaurant or bar	0.0	00	200	5 6	0 0	0.0	0.0	ç. ç	6.8	20.0	13.3	13.1	22.2	3.0	18.4	18.7
Empty building or site	0.0	10.5	2 6	2 [	2 6	0.0	0.0	3.2	4.5	20.02	3.3	9.9	13.9	6.1	18.4	18.5
Hotel/motel		2.2	200	7.0	0.0	-	16.7	12.5	4.5	20.0	13.3	11.7	11.3	9.1	18.4	10.7
Inacar	2 6	37.0	000	7)	5.6	11.1	16.7	7.8	2.3	13.3	0.0	10.0	8.3	6.1	14.3	15.5
One or more adults unacout at last	2	5.10	0.0	10.4	35.3	27.8	66.7	31.8	62.9	73.3	70.0	58.2	72.2	72.7	83.7	72.6
day of cigarette use	0.0	12.5	0.0	25.2	23.5	22.2	25.0	18.5	13.6	26.7	200	70	0 46	c c	5	
Sample size represents the number of way the second											?	ì	5.73	7.47	4.77	73.5

Table 13. Sources and Places of Student Alcohol Use\*

	Ď	Grade b	Ö	Grade 8	Gra	Grade 10	Gra	Grade 12
When I drank alcohol during the past year I	County 2007	State 2007	County 2007	State 2007	County	State	County	State
Sample size**	4	1		7007	7007	7007	7007	2007
Bought if in a store such as a figuror store		453	97	1813	53	3801	7.1	4472
gas station, or grocery store	20.0	3.1	0.0	2.3	0:0	3.4	11.3	7.1
Bought it at a restaurant, bar or club	0.0	24	5	000	,			
Bought it at a public event			3	7.0 7.0	6.1	2.7	7.0	5.4
Gave someone I know money	0.0	2.4	80	3.0	3.8	3.3	2.8	6.0
to buy it for me	0.0	5,1	19.2	16.2	50.9	41.2	70.4	62.9
Gave a stranger money to buy it for me	0.0	22	3.8	4.3	5.7	L	0.07	
Got it from a brother or sister	0.0	9.5	7, 1	17.4	7.0	g. g.	20.2	16.9
Got it from a parent or guardian	40.0	46.1	346	33.0	1.5.	23.0	31.0	23.6
Got it from another relative	0.0	23.4	3 7	27.7	24.3	41.4	13.7	18.5
Got it from a friend	40.0	15.0	42.2	1.72	5.4.2	20.3	7.9.7	23.4
Got it from someone I did not know at a party or event	0.0	60	5.7.4 A.7.4	42.5	1.1.1	91.7	83.1	79.0
Took it from home without my parents' permission	00	14.4	4.00	7.71	0.71	23.1	32.4	32.0
Took it from a store or shop	0.0	1. t	7.5.	72.8 0.00	28.3	24.3	21.1	19.3
Got it some other way	200	?	0.0	7.0	0.0	3.8	2.8	4.1
	70.0	20.8	38.5	19.9	11.3	17.7	12.7	17.0
	Gra	Grade 6	Gra	Grade 8	Grad	Grade 10	Grade 12	
During the past year, I drank alcohol at	County	State	County	State	County	State	County	State
Sample cite **	7007	7007	2007	2007	2007	2007	2007	2007
Af rest homo	3	457	23	1830	25	3822	22	4481
olo,	100.0	56.9	56.5	55.9	50.9	51.9	61.1	53.4
	33.3	33.7	43.5	60.1	78.9	78.3	917	86.4
At a mixture and and and	0.0	5.0	4.3	4.7	1.8	5.4	12.5	11.9
	0.0	2.6	8.7	6.1	7.0	9.5	16.7	184
	33.3	10.7	21.7	19.3	36.8	31.8	52.8	414
in an empty bullioning or a construction site	0.0	2.8	8.7	5.1	10.5	7.5	13.9	88
115 a Cal	0.0	7.0	30.4	17.3	50.9	35.3	59.7	51.0
On softed	0.0	2.6	13.0	9.7	5.3	10.7	12.5	19.0
	0.0	1.1	4.3	3.1	5.3	6.0	83	8.4
At some other place not listed	0.0	22.1	47.8	27.4	28.1	27.4	34.7	31.7
One or more adults present at last day of alcohol use	0.0	7.0	30.4	17.3	50.9	35.3	59.7	51.0
2003/05 NIPPES mossified slowly for the state of the stat								

Table 14. Drug Free Communities Report\*

	:			ľ				County 2007	2007					Γ
Outcome	Definition	Substance	Grade 6	e e	Grade 8	8 8	Grade 10	e 10	Grade 12	e 12	Male†	e t	Female†	ale.
			Percent	Sample	Percent	Sample	Percent	Sample	Percent	Sample	Percent	Sample	Percent	Samole
Perception of Risk	drink 1 or two drinks nearly every day	Alcohol	78.8	80	70.3	74	62.8	121	53.8	106	62.4	173	0.69	203
(People are at Moderate or Great Risk of harming themselves if they)	smoke 1 or more packs of cigarettes per day	Cigarettes	88.6	62	83.8	74	89.3	122	90.6	106	87.9	173	89.2	203
	smoke marijuana regularly	Marijuana	94.6	74	94.4	72	88.4	121	78.8	101	87.4	167	288.5	300
Perception of Parent Disapproval (Parents feel it would be Wrong or	drink beer, wine, or hard liquor regularly	Alcohol	100.0	62	91.9	74	85.5	124	72.9	107	86.3	175	86.3	204
Very Wrong to)	smoke cigarettes	Cigarettes	100.0	80	94.7	76	93.5	124	73.8	107	92.6	176	87.4	206
	smoke marijuana	Marijuana	100.0	80	98.7	9/	8.96.8	124	94.4	107	98.9	176	96.1	206
Perception of Peer Disapproval (I think it is Wrong or Very Wrong for	drink beer, wine, or hard liquor regularly	Alcohol	97.5	08	80.3	76	65.6	125	48.6	107	75.6	176	0.99	206
someone my age to)	smoke cigarettes	Cigarettes	100.0	08	82.9	76	75.2	125	54.2	107	80.7	176	72.8	206
	smoke marijuana	Marijuana	100.0	80	94.7	76	87.2	125	77.6	107	88.6	176	89.3	206
Dast 30 Day Inc	at feast one use in the past 30	Alcohol	0.0	8	17.1	76	25.4	122	46.7	107	22.2	176	26.5	204
ו מזר טר-במץ טאפ	days	Cigarettes	1,2	8	12.3	73	15.4	123	35.8	106	17.1	175	17.8	202
		Marijuana	0.0	8	3.9	76	3.3	123	7,5	107	5.1	175	2.9	206
			Percent S	Sample P	Percent S	Sample	Percent	Sample	Percent	Sample	Percent 5	Sample	Percent	Sample
	had more than a sip or two of	Alcohol	15.0	8	44.6	77	57.6	125	75.7	107	46.6	176	55.6	205
	מכני, אווכ כו ומנת וולמסו?	Average age:	10.3	10.3 years	12)	12 years	13.1	13.1 years	13.8	13.8 years	13.2	13.2 years	12.9	12.9 years
Average Age of Onset**  (How old were you when you first	smoked a cigarette, even just a	Cigarettes	5.0	జ	22.4	76	30.6	124	52.3	107	26.1	176	32.2	202
	3 1170	Average age:	10.2	10.2 years	11.6 years	ears	12.6	12.6 years	13.8	13.8 years	13.1	13.1 years	12.9	12.9 years
	smoked marijuana?	Marijuana	0.0	79	5.3	75	10.4	125	28.0	107	13.7	175	10.2	205
The "Comme of the second with the second second		Average age:	n/a	n/a years	13)	13 years	13.5	13.5 years	14.8	14.8 years	14.5	14.5 years	14.4	14.4 years

The "Sample" column represents the sample size (the number of youth who answered the question). The "Percent" column represents the percentage of youth in the sample answering the question as defined.

<sup>\*</sup> For Average Age of Onset, "Sample" represents the number of youth who answered the question (including students who did not use). The "Percent" colurm represents the percentage of youth in the sample reporting any age of first use for the specified substance. "Average age" is calculated by averaging the ages of first use of students reporting any use.

<sup>+</sup> The male and female values allow a gender companison for youth who completed the survey. However, unless the percentage of students who participated from each grade is similar, the gender results are not necessarily representative of males and temales in the community.

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